

# CHEMIST & DRUGGIST

the newsweekly for pharmacy

September 8, 1990

• OUR SUCCESS •  
RUBS OFF ON YOU



Mentholatum

▶ THE LEADERS IN TOPICAL PAIN RELIEF ◀

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**Pharmacy in  
Writtle after  
seven years**

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**Unichem's value  
put at £130m**

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**Setting up shop:  
making the  
buying decision**

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**Relieving the  
pain of cystitis**

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**Spectacle sales:  
professional folly?**

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**Out and about —  
the Mayoress  
of Bromley**

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Memorable new animated commercial.  
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With more to come.  
It's all happening for you and

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Aquafresh everyone's a  
winner.

\* Source AGB. Aquafresh is a trademark of SmithKline Beecham Personal Care, Brentford, Middlesex, England.

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## COMMENT

Dispensing in rural areas has been a bone of contention between doctors and pharmacists ever since David Lloyd-George set up the national insurance scheme in 1911. Indeed, in an interview with *C&D* in 1986, the first chairman of the Rural Dispensing Committee, the late Sir Alan Marre, recalled that the problem of rural dispensing was "festering" when he first joined the Ministry of Health in 1936.

Even during the life of the soon-to-be-defunct Rural Dispensing Committee, created after eight years of negotiation between doctors, pharmacists and the Department of Health, certain disputes became *causes célèbres*: Tenterden, Coggeshall, Crawley Down and Sawtry. Overshadowing them all, the longest and most bitter struggle has been in the Essex "village" of Writtle. This week, we report that seven years after the application was first received by the local family practitioner committee, Writtle finally has a proper pharmaceutical service (p372).

The pharmacy has been open for a month and pharmacist Rajat Patel reports that it has been welcomed

as a useful addition to the local community facilities.

The rural dispensing issue is now entering a new phase with the abandonment of the RDC. Back in 1986, Sir Alan forecast that the then "new" contract was going to make it harder for pharmacists to open rural pharmacies. With the decisions on this most complex of interprofessional matters now being left to local opinion, evidence suggests that pharmacists are going to find the job of pursuing their career in an area of most need is going to be even more difficult. A further case from Essex supports this view.

In one of its last decisions, the RDC approved five applications for pharmacies in the village of Hatfield Peverel. As usual, local doctors appealed. As usual, the Secretary for Health dismissed the appeal. But when Essex's pharmacy practice subcommittee considered the three applications still in the running, the lay members ignored all advice and refused all applications. Appeals by the LPC and two applicants are being heard this week. Further legal steps may follow. It is to be hoped this case does not run and run like that of Writtle.



## PPA changes constitution

Regulations specifying the revised constitution of the Prescription Pricing Authority come into effect on September 17.

The PPA will consist of a chairman, a general practitioner, a pharmacist providing pharmaceutical services, the chief officer of a family health services authority and the chief officer of the PPA. In addition there will be three members who are not or never have been a medical practitioner, a pharmacist, a dentist, an optician or registered with the UK Council for Nursing, Midwifery and Health Visiting.

The NHS, England and Wales, PPA Constitution Order 1990 (SI No 1718, HMSO £0.55) replaces a similar Order made in 1978 and provides for the PPA to be specified as a special health authority of which the chairman and certain other members may be paid.

The NHS England and Wales PPA Regulations 1990 (SI No 1719, HMSO £0.95) provide for the appointment and tenure of office of PPA members.

## PSNC back in the black

The Pharmaceutical Services Negotiating Committee made an after tax profit of nearly £60,000 last year, compared with a small deficit in 1988-89.

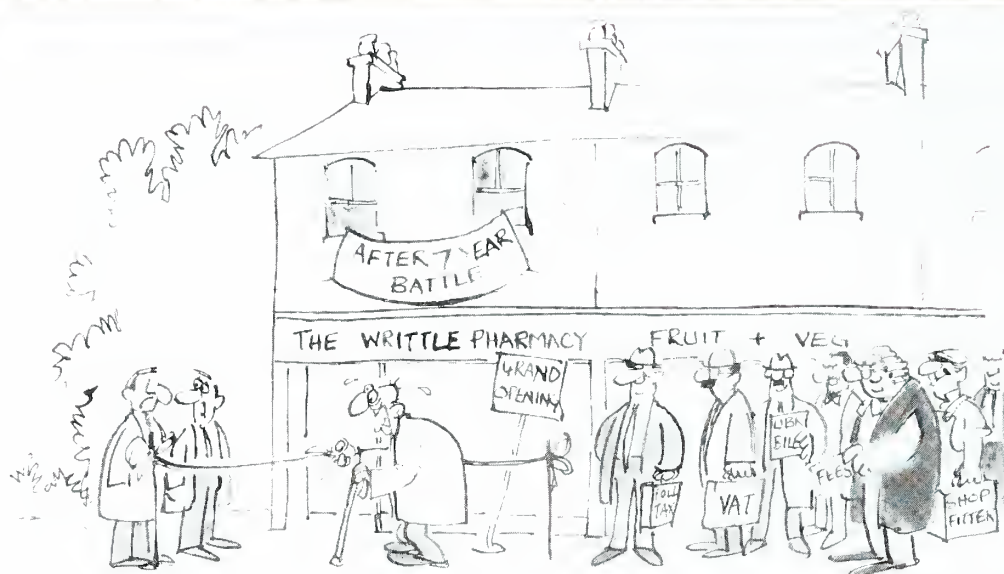
PSNC made an operating surplus of £110,943 (1989 £2,114) in the year to March 31 on income of over £1.3 million. The general fund balance is now £196,000.

Accounts in the previous year were greatly affected by £116,950 paid as "compensation for loss of office", believed to be the amount paid to former chief executive Alan Smith on his departure.

## Guild waiting on pay talks

The Guild of Hospital Pharmacists is still waiting for a response to its 10.5 per cent pay claim submitted in June.

Chairman of the staff side negotiators Bob Timson told C&D a change in the secretary of the management side might be causing a delay, but the Guild is still hoping for a joint meeting to discuss a settlement by the due date, October 1.



"Is it really worth it?"

# Writtle pharmacy opens after seven year wait

Some 2,491 days after Mr Jayantilal Patel wrote to Essex FPC applying to open a pharmacy in the village of Writtle, near Chelmsford, his son and daughter-in-law Mr Rajat and Mrs Bina Patel have finally opened the Village Pharmacy.

Mr Patel told C&D that the reaction in the village has been very positive. "All the customers have been saying that they had wanted a chemist for quite some time. No-one has come in with a negative view."

For Essex LPC secretary Miall James, who took the photograph, it is the end of an era too. Mr James says he visited the pharmacy in the first few days after it opened and was impressed, both with the premises and with the way the locals were patronising it. He says he can now close his file, which weighs eleven pounds!

It was on April 2, 1983 that Mr Patel senior first lodged an application to open a pharmacy. Backing from the Rural Dispensing Committee followed and the Secretary for Health dismissed an appeal by the doctors. Mr Patel was, for a long time, unable to obtain premises. In 1987 the doctors applied for a judicial review over the Secretary for Health's handling of the appeal. In the resulting oral rehearing of the appeal the application for a pharmacy was again upheld.



The Village Pharmacy, The Green, Writtle

## Costly drugs: who pays?

A working party set up to investigate who should pay the cost of expensive drugs prescribed in hospital, has met for the first time. It comes as concern is expressed about the passing of such costs from hospitals to general practitioners.

The chairman, civil servant John Anderson, said the Government was firmly committed to the principle that prescribing costs should be borne by the doctor who had clinical responsibility for the patient.

However, the GP representative, Dr Tony Stanton, believes

that the term "clinical responsibility" requires definition. He suggests that GPs state in their referral letter whether they wish the patient to be permanently transferred to the consultant's care or whether the referral is merely for advice.

In addition, the Department of Health is set to launch a national survey into prescribing policies in hospitals, while researchers at St George's Hospital, Tooting, are to question 300-plus of the largest hospitals about the duration of medication with which patients are discharged.



## PGC agrees 7pc on fees (misc)

The Pharmaceutical General Council in Scotland has agreed a 7 per cent increase in miscellaneous fees from April 1, 1990. An interim increase of 5 per cent had been applied up to now. The change will be backdated.

□ Lower prices for certain generics came into effect in Scotland on September 1. The changes are listed in a special update of parts 7A, 7S and 7L of the Drug Tariff sent to contractors.

□ Contrary to information carried elsewhere in the pharmaceutical Press, peak flow meters are not yet prescribable in Scotland says the PGC, which awaits notification from the Scottish Home and Health Department of a date for their inclusion in the Tariff.

## Book on urinalysis

Ames Division of Miles Ltd have published a 136-page reference book on clinical urinalysis, with contributions from numerous disciplines.

"Clinical urinalysis" is divided into two sections. The disease related section establishes causes and detection of conditions such as proteinuria, haematuria and urinary infections. The practice section discusses the clinical significance and relevance of urine testing. "Clinical urinalysis" is available from Ames Division, Miles Ltd, Slough, price £6.50.

**Regulations** covering applications by GPs for fund-holding status come into force on September 17. The National Health Service (Fund-holding Practices) (Applications and Recognition) Regulations set out how larger general practices can get their own budgets.

**GPs are being urged to liaise** with pharmacists when developing formularies in an editorial in the latest *Mims Magazine*. The information that hospital drug information pharmacists or community pharmacists can provide may make the difference between an impractical formulary which is left on the shelf, and one that is a practical day to day guide to prescribing, the article says. Pharmacists are ready and willing to participate, it concludes, posing the question: "Are GPs willing to let them?"

## CV drugs cost most

Preparations acting on the cardiovascular system and diuretics cost more than any other therapeutic class of medicines dispensed in England in 1988.

The 59.4 million prescriptions for these drugs cost £391.2 million, according to the Department of Health's "Health and Personal Social Services Statistics for England, 1990 Edition" (HMSO £10.85). Preparations acting on the nervous system (hypnotics, sedatives, tranquillisers, anti-depressants and minor analgesics) accounted for more prescriptions than any other category (67m) but

cost less than cardiovascular drugs (£168.3m). Preparations acting on the gastro-intestinal system cost £198.3m while those for rheumatism cost £190.5m.

The total number of prescriptions dispensed in England in 1988 was 346.5m at a total net ingredient cost of £1,737.2m. Non-proprietary medicines accounted for 29.6 per cent, or 9.2 per cent of net ingredient cost, a slight increase on the previous year.

In 1989/93 pharmaceutical service cases were investigated, a breach found in 68 and remuneration withheld in 32.

## Two or three times a day hydrocortisone?

Patients taking hydrocortisone for adrenal insufficiency should be advised to try twice and three times a day dosage schedules to see which suits them better, says the *Drug & Therapeutics Bulletin*. The only proviso is that the total daily dose should remain the same, after careful titration and addition of fludrocortisone, where necessary.

It is normal to give two-thirds of the daily dose in the morning and one third with the evening

meal, supposedly to mimic the natural circadian rhythm of cortisol. But this often gives cortisol levels as low in the afternoon as they are in normal people at night. "Does this matter, considering that replacement cannot imitate the natural pulsatile secretion of cortisol?" the *Bulletin* asks.

It describes a recent study in which five out of seven patients preferred three times a day dosing.

## D&TB view of Epogam prompts comments from Scotia

Claims that Epogam produces a "substantial and highly significant clinical improvement" in atopic eczema seem exaggerated, says the *Drug & Therapeutics Bulletin*. In response, manufacturers Scotia Pharmaceuticals say an average 20 to 25 per cent improvement in relieving itch will be considered "substantial" by many patients.

Reviewing the use of gamolenic acid in atopic eczema, the *Bulletin* says four out of five trials suggest Epogam may have a modest therapeutic effect, but that only the effect on skin roughness has been reliably demonstrated.

The *Bulletin*, published by the Consumers' Association, says that while evening primrose oil has yet to be compared with any conventional treatment, the most widely used — low or moderately potent corticosteroids — have not been properly evaluated and long-term use is problematic.

The report concludes that

since the effects appear "rather marginal", Epogam is, for the present, best regarded as an optional addition to existing treatment, and as a dietary supplement rather than a medication for eczema. "It is expensive" the *Bulletin* adds.

Scotia say studies on Epogam published in the *British Journal of Dermatology*, involving over 300 patients, most treated for over three months, show Epogam was "consistently and highly significantly better than placebo. Epogam was particularly effective in relieving itch without causing any drowsiness. Most patients and dermatologists regard itch as the most important symptom in atopic eczema."

Scotia admit that "substantial" is a word open to many interpretations, but submit that the degree of average improvement — 20 to 25 per cent — over and above the best that can be currently achieved, "will

be considered substantial by many patients. We do not see why it should not be so considered in a chronic dermatological condition which causes immense distress to patients."

Scotia say the *Bulletin* ignores an effect of particular importance. In one study, Epogam allowed topical steroid use to be cut by two thirds; a major benefit considering the effect of long-term steroid use. The company is pleased the *Bulletin* acknowledges the lack of adequate studies on other drugs.

**The Tryptophan in Food Regulations** (SI No 1728 HMSO £0.95) have now been published (last week, p333). Coming into effect on September 12, the regulations prohibit the addition of tryptophan to food for human consumption and its sale or supply, unless a doctor certifies the food is necessary on medical grounds when it may be supplied by a pharmacist or given in the course of hospital treatment.

## Consumers' packaging likes and dislikes

Younger consumers are intolerant of old fashioned packages such as tins and glass jars and feel guilty about throwing away excessive packaging, according to a survey carried out by consumer research analysts Mintel. The report also reveals that one in four consumers find blister cards infuriating to open.

Retailers' main complaints centred around inadequate protection during handling and transport, while other common criticisms were badly designed display trays, lack of outer case bar coding and products whose packaging is not in harmony with the contents. Also, tamper-proof packages were pinpointed as being of greater importance.

However, grocery packaging came off the worst with nine out of ten consumers unhappy with the way at least one of their regular grocery items is packaged. The packaging was seen as dangerous, wasteful, or difficult to use or store. *Packaging and the consumer*, Mintel International Group, £950.00.



## Action Asthma launches survey

A nationwide survey to assess the quality of life and the needs of asthmatic patients has been launched by Action Asthma, in conjunction with a report that estimates the cost of asthma will approach £½ billion this year.

Action Asthma is an initiative developed by chest physicians and GPs, sponsored by Allen & Hanburys, which aims to address the problem of poor control of the condition and to improve communication between patients, GPs and specialists. "The ultimate aim is to convince both doctors and patients that the goal of asthma management is to attain a life free from symptoms, with as near normal lung function as possible", said Professor Tim Clark, chairman of the new group.

There is little information about patients' attitudes to asthma but the group believes many suffer unnecessarily, often adapting their lifestyle to avoid aggravating their condition.

To evaluate the extent of this, Action Asthma have compiled a questionnaire for the UK's two million asthmatics. It includes questions on the number of night-time attacks of wheezing or breathlessness, how much day-to-day activities are restricted, and the number of home visits and hospital admissions.

"The occurrence and cost of asthma" report, also launched by Action Asthma, estimates that asthma will cost the Government £½ billion this year — £400m for NHS treatment and £60m in sickness and invalidity payments. Asthma may also account for £300m in lost productivity.

The report also highlights the cost to patients. There are 2,000 deaths from asthma a year in the UK, representing one person every four hours. It is the only treatable disease for which the death rate is not falling.

Speaking at the launch of the survey and report, Professor Clark described the condition as "a growing burden on society". "Better control of asthma is of benefit both clinically and economically", he said.

Copies of the survey will be placed in hospital clinics, GP surgeries and pharmacies. Pharmacists can obtain copies from Allen & Hanburys representatives or from Action Asthma, PO Box 63, High Wycombe, Bucks HP10 8XA.

# TOPICAL REFLECTIONS

by Xrayser

## Cholesterol check-up

I have at last had the opportunity to examine a Chemcard home cholesterol testing kit, and having performed it on myself, found the result very difficult to interpret accurately. Certainly my levels were not in the lower levels of the colour chart, but whether they were normal or high neither I nor my staff could determine.

The packaging shrieked of a "rush job" imported from the States and the test was easy to conduct, but the patient leaflet offered only the barest of details, poor interpretation instructions and no lifestyle counselling at all. There has been a lot of customer interest in this test and I am sure it would sell well, but as currently presented it is unsatisfactory.

Even if accurately performed and interpreted most patients would tend to underestimate the reading and not seek further professional advice. The best test must be the one professionally performed, professionally interpreted and professionally counselled.

## Catching a cold?

*Financial Pulse* (August 14) calculates that the conscientious GP should be able to earn £2.70 profit per patient for each personally administered 'flu vaccine given this Autumn. I calculate that the cost to the NHS if the same vaccine was supplied on an FP10 would be approx £1.25, a saving of over 50 per cent.

The probability of the Department of Health treading on medical toes and reducing the GP's fees, or insisting on supply through pharmacies, is as remote as an accurate discount scale for



dispensing doctors, but this Winter I will be prepared for the irate patient who cannot obtain his vaccine from me after his doctor has run out. I have photocopied the article in *Financial Pulse* and will send it, patient, and undispensed prescription back to the surgery without further comment.

## Antipodean life

Community pharmacy in Great Britain will always have to practise in direct competition with big business because the law allows public limited companies to employ superintendent pharmacists. There is no limitation to the number of branches owned by one company and thus the multiples exert an ever tightening stranglehold over the profession.

In New Zealand the law is different and Boots have never been able to establish a viable retail enterprise. Recently (*C&D*, August 25) it was reported that Boots had closed their 16 New Zealand outlets. I am green with envy for my Antipodean colleagues but also full of incredulity for, in the same week, it was reported that price cutting on New Zealand health service prescription fees had caused an Auckland pharmacy to close. That pharmacies could consider competing for custom by cutting a prescription tax appears crazy, but to embark on such a course at the very moment when their independent professional future appears to have been assured, is suicidal.

Such attitudes have not yet permeated this far North, but complacency would be dangerous. Our Government has already encouraged cut price tax competition by opticians. Extension of this to pharmacy must be vigorously opposed.



# COUNTERPOINTS

## Savlon gets an update from Ciba

Six months after acquiring household name Savlon from ICI subsidiary Care Laboratories, Ciba Consumer Pharmaceuticals are relaunching the brand with new logo and packaging.

While having to lose the ICI symbol, which for many characterised Savlon, designer Alison Kirk of BDFS has evolved a new design in blue and white which retains the circle in keeping with the brand's visual heritage since its launch in the '50s.

Keeping these core elements in a new design aims to increase impact on-shelf without losing consumer recognition, according to Ciba.



Marketing manager Steve Barrington says CCP acquired Savlon with the aim of "reinvigorating it and unlocking its tremendous potential by sustained investment". The redesign marks the first stage.

Savlon liquid antiseptic is the first to sport the new look, which will soon be seen across the entire product portfolio.

Savlon is being advertised on national television for the first time in five years as part of a £1.5 million brand promotional spend over the next year. *Ciba Consumer Pharmaceuticals. Tel: 0403 50101.*



## Beecham build on Badedas for boys

Following consumer research which indicates that men take showers more frequently than women, Beecham Healthcare have introduced a Badedas shower gel which has been designed specifically for men.

The new product is a thick, dark green gelée which is said to clean and condition the skin while "delivering a highly distinctive fragrance".

Shower gels are the fastest growing sector of the male toiletries market and men account for 53 per cent of shower gel usage, say Beecham. They add that male shower gels account for 23 per cent of the total shower gels market.

The number of showers installed has increased from a level of 29 per cent in 1984 to over 40 per cent today.

The new gel will be available from September 20 and this coincides with a new look for the entire Badedas shower gel range. It will come in three distinctive

colourways and is targeted at three distinctive users: creme variant to help moisturise dry and delicate skin; original — a revitalising formula; and fresh which can be used on hair and body and has a definite unisex appeal, say Beecham.

The company is running a £500,000 Press advertising campaign to support the relaunch. Advertisements will be carried in the women's Press and a poster campaign will appear in November.

Point of sale material is also available along with window display material.

Commenting on this activity, marketing director Wendy Davidson says: "Badedas still has and will continue to have a strong unisex heritage, but changes in lifestyle dictate market force. We believe that now is the right time to introduce a male shower gel, for a specific target market." *SmithKline Beecham Healthcare Ltd. Tel: 081-560 5151.*

**Robinson Healthcare** and **Elbeo** have announced a joint venture for the distribution of Elbeo fashion support hosiery into chemists and supermarkets. Robinson have also secured the exclusive distribution of Elbeo's compression hosiery into pharmacies, and exclusive distribution of Elbeo anti-embolism hosiery into the National Health Service. *Robinson Healthcare. Tel: 0246 220022.*

**Sangers' Orient Express** promotion has reached its Zurich stage. In return for orders of £100 or more of Polaroid films, Sangers are giving away Swiss chocolates, fondue sets and Ingersoll watches. The retailers also receive a postcard of Zurich; if they have collected all four cards in the series the retailers qualify for a chance to win a trip on the Orient Express. *Sangers Photographic Ltd. Tel: 021-523 4471.*

## Actomite targets dust mites

Searle claim house dust mite levels can be dramatically reduced with the acaricide Actomite. Used regularly every three months, Actomite kills at least 90 per cent of mites within 36 hours, and also prevents egg maturation and larval development, the company says.

Actomite contains s-bioallethrin 0.293 per cent and bioallethrin 0.585 per cent. One CFC-free canister (354g £11.95) contains enough to spray an average sized room. Actomite has been approved by the Health and Safety Executive for home use and shows excellent user tolerance, even among asthmatics, say Searle.

Searle recommend vacuuming and acaricide as neither gets rid of dead mites on its own. *Searle Consumer Products. Tel: 0494 21124.*



**Two contact lens care products** made by Abatron are now available through Vestric and Unichem. The products are Amidose sterile saline (12 by 30ml tubes £5.64) and Amiclair protein remover (10 £3.34, 24 £7.25). The 10 pack is a line extension. *Abatron Ltd. Tel: 0767 261333.*



## Bodyplan into soups

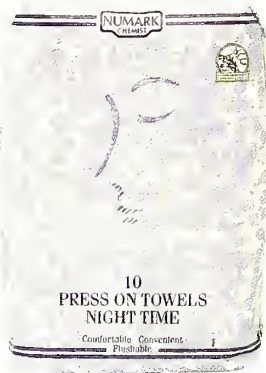
Reckitt and Colman are expanding their slimming programme — Bodyplan — with the launch of a range of soups. Slimmers now have the choice between a hot or a cold meal replacement for an "all year round weight control programme", says the company.

The hot soups, come in either thick mushroom or thick vegetable flavours and are fortified with oat bran and essential vitamins and minerals say Reckitt and Colman. The new soups will be available from October 1990 and will retail at around £3.59 for a pack containing four sachets of soup of either flavours. *Reckitt & Colman Pharmaceuticals. Tel: 0482 26151.*

## Slim Fast now comes in sachets

Thompson Medical have introduced Slim Fast sachets in Scotland and Tyne Tees areas only.

Eight 35.6g sachets come with a shaker and one flavour — chocolate, strawberry or vanilla — in each carton (£5.99). Six cartons make up an outer. *Thompson Medical Co Ltd. Tel: 0753 693600.*



Numark have added night time press-on towels (10 £0.95) to their range of feminine protection products. It is the only own label night time towel available within pharmacy, the company claims. Night time towels are the fastest growing sector of the market; Numark's come in outers of ten, and give a profit on return of 27 per cent, say Numark Management Ltd. *Tel: 0827 69269.*



## Complan goes bananas with new variant

A banana flavoured variant has been added to the Complan range, and is being test marketed in the North.

Consumers in Scotland, Tyne Tees, County Durham and Cumbria will be the first to sample the new flavour, which Crookes say has been launched to broadened Complan's appeal.

The company is confident that with banana "already proven" as a popular flavour with consumers, sales in the test market will allow banana Complan to go national.

Crookes will be supporting the brand with an advertising and sampling campaign (*Counterpoints*, last week). *Crookes Healthcare Ltd. Tel: 0602 507431.*

## Street critique for Braun's Flex Control

Braun will be using pavement testimonials in their campaign for the new Flex Control shaver.

Faced with selling an £84.95 Flex Control to a public more used to paying under £30 for a shaver, Braun are opting for the personal touch. They will shortly film a pool of interviews to be used in a £1.6m television campaign over the key Christmas period. "Clean

shaven" men on their way to work will be invited to try a Flex Control and comment.

Braun are to spend a further £400,000 on other promotions for Flex Control, which marketing director Geoff Brock says is the "first in a series of new shavers that is going to change the face of British men". *Braun (UK) Ltd. Tel: 0932 785611.*

## Derbac ads

International Laboratories are targeting pharmacists, health visitors, community and school nurses with a £70,000 advertising campaign for Derbac.

It runs through to Christmas, and has been timed to correspond with the peak sales period for head lice treatments at the start of the new school year. *International Laboratories Ltd. Tel: 061-945 4161.*

## Dylon go for turtles

Dylon are featuring the "Mutant Hero Turtles" characters on a range of fabric painting kits for children.

Each kit features an individual turtle, four bottles of colour paint and two iron-on transfer sheets (£4.99). *Dylon International Ltd. Tel: 081-650 4801.*

## Mentholatum offer '300-year-old' jar

A replica of a 17th Century apothecary jar is being offered to support Mentholatum's Autumn/Winter bonus.

It is a reproduction of the style of Gallipots used 300 years ago, and comes with a certificate.

Mentholatum's bonus offer consists of special prices across their various product ranges. Offered at 12 as 11 are Mentholatum vapour rub 25g and 30g, all sizes of Deep Heat rub, Deep Heat spray 120g (20 per cent extra fill), and Deep Freeze spray 200g.

At 12 as 10 are Mentholatum nasal inhaler and lozenges, Deep Heat extra strength 55g and 110g, Cutipen, and Stop 'n Grow. At 12 as 9 are Deep Heat pre-sport rub and lotion.

Evenflo breast pump and feeding set are offered at 25 per cent off. *The Mentholatum Co Ltd. Tel: 0734 340117.*

## Schloer boost

Beecham are supporting their Schloer fruit juice drink with an on-pack promotion this Autumn.

Consumers are asked to collect four proofs of purchase from specially marked bottles and then to send off for a 175g box of Suchards chocolates. The promotion applies to all variants, say *Beecham. Tel: 081-560 5151.*

## Changes to Dioctyl formulation

Medo Pharmaceuticals' Dioctyl tablets are being reformulated and a new size is being added to the range during October.

The sugar coat on the tablets has been replaced with a yellow film coat; new packs will be distinguishable from old by a new design of label, says the company.

The new pack is a 30 tablet size (£0.83); the prices of the 100 and 250 packs remain unchanged. *Medo Pharmaceuticals Ltd. Tel: 06285 29662.*



# NO MORE PAIN NO MORE TEARS



BUT...

**MORE**  
advertising than ever before  
including T.V. Times and Me

**MORE**  
retail support, including  
displays, consumer  
leaflets and carrier bags

**MORE**  
retail bonuses available

**SO ORDER  
MORE**

**Medised™  
NOW!  
for...**

**Medised™**  
Soothing pain relief


Gently reduces temperature  
relieves toothache, headache,  
sore throat, fevers, colds and



**Medised™**  
Soothing pain relief

# ...LOTS MORE SALES



A close-up, high-resolution portrait of a woman's face. She has light skin, well-defined eyebrows, and striking blue eyes. Her expression is pleasant, with a slight smile. The lighting is soft and even, highlighting her features. The text is centered in the lower half of the image.

**New Mentadent P  
will leave you speechless.**





### NEW BREAKTHROUGH FORMULATION.

It's clinically proven to give gums twice the protection of ordinary toothpaste.\*

Contains two anti-bacterial agents to fight plaque, the cause of gum disease.

And it's the only Gum Health toothpaste with a Department of Health Product Licence.

### NEW BREAKTHROUGH PROFITS.

It's positioned with a new, significant price premium. With a £4 million support package to guarantee sales.

£3,000,000 TV and Press advertising.

£500,000 national door-to-door sampling.

£500,000 with the dental profession.

New Mentadent P Gum Health Formula will bring a smile to your face.

FOR GUMS, FOR TEETH, FOR LIFE.

\*Independent Clinical Trials: Svaton B, Saxton CA, Ralla G. Six-month study of the effect of a dentifrice containing zinc citrate and triclosan on plaque, gingival health and calculus. Scandinavian Journal of Dental Research. In Press 1990.



## Caribbean colours from Addis

The latest addition to Addis' range of hairbrushes is caribbean colours, a vividly coloured, vented bobble hairbrush.

In tropical colours of fluorescent pink, green and blue with bobbles of yellow, caribbean colours (£1.15) is a lightweight brush, described as ideal for holidays.

It comes in display trays of one dozen (£7.20 trade) comprising four brushes in each of the three colours — with a caribbean colours descriptor. *Addis Ltd.* Tel: 0992 584221.



## Vosene goes sky-high

Smithkline Beecham are linking with Sky Television to offer a family "watch 'n wipe" three-hour video that features highlights of specially edited Sky Television programmes.

The offer is being featured on both Vosene original and herbal variants on 150ml and 300ml pack sizes, and will cost £2.99 plus two tokens. Two tokens are on 300ml and one token on 150ml packs.

Consumers can also enter a "spot the difference" competition which is featured on-pack. They will have the chance to win one of 50 satellite systems. *Smithkline Beecham Personal Care.* Tel: 081-560 5151.

**Amami Setting Lotion** from Smithkline Beecham, now has a new look featuring modern new pack graphics. The recommended pricing level is retained at 89p for 80ml and a promotional programme designed to encourage trial and purchase that (including couponing offers) will support the relaunch. *Smithkline Beecham Personal Care.* Tel: 081-560 5151.

## Healthlife peppermint

Peppermint tablets are the latest addition to the Healthlife range of supplements.

The main uses of oil of peppermint include aiding the digestion, and helping maintain digestive comfort while travelling, say Healthlife.

Peppermint tablets (150 £3.49) come in outers of ten. The tablets have no artificial additives, and are suitable for all the family, say *Healthlife Ltd.* Tel: 0274 595021.



## Nestlé plant offer with Build-up

Nestlé Health Care are offering consumers a free house plant with three purchases from the Build-up range.

"House plant tokens" will feature on packs of natural flavour Build-up and will be available this month. Consumers are asked to collect three proofs of purchase in order to claim their free plant.

These are available in

exchange for two tokens from special house plant promotion packs plus one other pack top from any variety in the Build-up range. A choice of three plants is offered says the company.

The plants will be delivered direct to the consumer and the closing date is September 29. *Nestlé Health Care.* Tel: 081-686 3333.

## New look for Falcon hairspray

Beecham Toiletries have given their Falcon range of male hairsprays new packaging and an updated logo.

The Falcon bird insignia remains, but now appears in a more "sophisticated" form, says the company. The branding is also represented in larger, more dominant print across the front of the can.

To coincide with its relaunch, the hairspray features added value in both variants say *Smithkline Beecham Personal Care.* Tel: 081-560 5151.

**Beecham's Sixth Sense** body spray is currently being promoted with an £800,000 advertising campaign. The advertisement will appear on TV-am and this month breaks in London and regional cinemas. *Smithkline Beecham Personal Care.* Tel: 081-560 5151.

The **Konica A4 compact** camera is now available with a built-in automatic date imprinting feature. The camera costs £129.95, or £20 more than the standard model. *Konica (UK).* Tel: 081-751 6121.

## Mum support for October

Bristol-Myers are supporting their Mum anti-perspirant deodorant range with a nationwide coupon offer to be launched during October.

The instant money-off promotion offers consumers 20p off the price of Mum solid (55gm — £1.45). An on-pack coupon peels off and can be presented at the till for money off the same item. The instant money-off promotion will be available on all variants of Mum Solid. Sales of solids are up 17 per cent, say *Bristol Myers Co Ltd.* Tel: 0893 639911.

## Danapharm to the UK

The Danapharm evening primrose oil cream and lotion, formulated in Denmark, is being introduced into the UK market.

The cream and lotion both retail at £4.95 and are said to be hypo-allergenic, clinically tested on humans rather than animals and have full ingredient and potency labelling. *Danapharm UK Ltd.* Tel: 0462 438444.

**Sterling Health** have introduced two display units for Solpadeine: a range counter unit, and a shelf reserver flashed "new" for the 72 capsules size. Units are being distributed via the company's field sales force during September and October. *Sterling Health.* Tel: 0483 65599.

### ON TV NEXT WEEK

GTV Grampian	U Ulster	SK Sky
B Border	G Granada	STV Scotland (central)
BSB British Satellite Broadcasting	A Anglia	Y Yorkshire
C Central	TSW South West	HTV Wales & West
CTV Channel Islands	TTV Thames Television	TVS South
LWT London Weekend	TV-am Breakfast Television	TT Tyne Tees
C4 Channel 4		
<b>Aquafresh toothpaste:</b>		
		All areas BSB and Sky
<b>Colgate toothpaste:</b>		
		All areas
<b>Efamol evening primrose oil:</b>		
		TVS
<b>Impulse:</b>		
		All areas except CTV, LWT, A, TVS & TV-am
<b>Inoven:</b>		
		All areas
<b>Listerine:</b>		
		GTV, STV
<b>Loving Care:</b>		
		U, STV, C, HTV, TTV, TT
<b>Mum deodorant:</b>		
		All areas
<b>Nivea Lotions:</b>		
		STV, Y, C, A, HTV, TSW & TT
<b>Plax:</b>		
		All areas except LWT
<b>Sanatogen cod liver oil:</b>		
		G, Y
<b>Savlon:</b>		
		All areas
<b>Tums:</b>		
		All areas





## GUESS WHO'S GAINING MUSCLE

- We've gained muscle in the market – going from “No. 4” to “No. 2” in two short years. (BPI)
- We're flexing our muscles on shelf with the most exciting brand development idea in the market – unique formula Radian-B Mineral Bath Salts and Liquid.
- We're consistently winning new users with the mighty muscle of TV, Press and PR – and you know what a winning combination that is.
- Don't miss out on our exciting deals and support packages. Together we can make a mighty team.



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■ RADIATES RELIEF

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FISONS CONSUMER HOTLINE  
ON 0509 611001  
EXTENSION 3045



## Bourjois goes pure on the face

Bourjois are looking to combine skincare and colour cosmetics with their latest product — poudre légère, a moisturising loose face powder.

The powder (£4.99) is said to give the complexion a light radiance without shine. It is easy to blend and helps to maintain the skin's natural moisture balance as well as absorbing excess oils without having a drying effect, say Bourjois.

The product comes packaged in a black drum with a silver logo and is translucent.

The company has also come up with a teint léger mousse make-up, said to add a translucent colour to the complexion while evening out minor skin imperfections. It is described as "ideal for women looking for the unmade-up look".

The mousse (£4.99), will be available from the beginning of next year. It is ozone friendly, and comes in five shades (including a white make-up base), say Bourjois.

The product is presented in a white spray, topped with a silver cap. Each shade is indicated by a coloured square on the front of the canister.

The product is also offered at pos with a tamper proof sleeve — an invisible film that seals the cap and prevents it from being too easily opened, say Bourjois Ltd. Tel: 071-493 3836.

## Almay shades recall India

Wild Kashmir is the Autumn colour story for Almay, recalling shades of Indian Summers and dusky nights.

Muted browns, subtle greens and kiln baked soft reds are colours for eyes and lips (prices £2.95 to £5.95); Trio eye shadows come in coffee tones (£5.95) with shades of brown for mascara.

Extra protection make-up (£5.95) and loose face powder come in pale, clear shades of bisque and beige. Nicholas Laboratories Ltd, Cosmetics Division. Tel: 0753 23971.

**Collection 2000's** face kit and eye collection kit will be available at Tesco's top 80 stores in the UK from October 22 for the run up period to Christmas. Collection 2000 Ltd. Tel: 0732 453213.



## Bristows gets snappy with update

In an attempt to attract a younger woman as well as build on its current performance, the Bristows range from Beecham Toiletries has been updated and a new variant added.

The hairspray range now features four variants, each one packaged in its own livery with modern graphics and a silver Bristows logo.

Normal hold now comes in rose livery; conditioned hold in mint; extra firm in jade and new ultra hold in sapphire.

To complement this, the Bristows shampoo range has also been repackaged to create a "visual synergy" with the hairsprays, say Smithkline Beecham Personal Care. Tel: 081-560 5151.

## Sensiq goes to nature for inspiration

Inspiration comes from nature for the Sensiq Autumn collection from Rimmel which contains a selection of earthy tones.

The collection coincides with the introduction of a water resistant eye definer, and is divided into two distinct tonal fields: "wild damsons" and "burnt siennas".

Wild damsons contains trio shadow silk eye colours (£3.29) in shades of mauve, gold and pearl; luxury lip colour (£2.65) in a clover plum shade and nail polish (£1.95) also in clover plum.

Burnt siennas contains shades of mahogany, chestnut and gold for the eyes; with russet for lips and nails.

The company has also introduced a water resistant eye definer into the range (£2.49), which is said to be suitable for defining "even the most sensitive eyes".

Available in four shades, the pencil is fragrance free and comes in a matt grey lacquered barrel with silver graphics. Rimmel International Ltd. Tel: 071-637 1621.

## Bourjois are glowing with Poudre de Soleil

Poudre de Soleil is the latest powder product to be added to the range of cosmetics produced by Bourjois.

The powder is said to give a healthy glow to skins all year round, especially in the Autumn when tans are fading. It is said to have all of the properties of a loose powder with the additional

convenience of a compact.

Poudre de Soleil comes packaged in a round colour matched container decorated with silver and comes in one matt shade, hale along with its own washable puff. Poudre de Soleil will be available this month and it will retail at £4.99. Bourjois Ltd. Tel: 071-493 3836.

## Maxi's quick cover up for daytime

Quick Cover face make-up is the latest all-in-one make-up from Max Factor, introduced into their Maxi range.

The product (£2.19) is a blend of powder and creamy foundation and is said to provide day long coverage along with UV protection. It is also fragrance free.

It comes packaged in a compact with a lift-off lid and a soft puff for initial application. Max Factor Ltd. Tel: 0202 524141.

## Tweed for the country

Lentheric are launching the Tweed Country collection as a companion to their original Tweed fragrance.

The new collection includes: talc (100g £3.50); PDT spray (25ml £6.95, 50ml £9.95); EDP spray (15ml £7.50); Esprit de parfum (£12.50); purse sprays (10ml £2.75) and bag presentation (£12.50). Lentheric Morny Ltd. Tel: 0276 62181.



Smithkline Beecham have joined with Johnson Wax to offer consumers a free Glade cocoon on packs of Aquafresh toothpaste. The cocoon will come free with every 200ml toothpaste and the promotion begins this month. Smithkline Beecham Personal Care. Tel: 081-560 5151.

Unichem's first aid dressings have been repackaged as part of the redesign of their own label range. Unichem. Tel: 081-391 2323.

Swaddlers Togs nappies are being distributed by the Jenks Group. Tel: 0494 33456.



# NO.1 BEST SMELLER



Last Christmas Brut got right up the competition's noses by being Britain's favourite range of gift sets. And this year's £1.5 million spend on support is certainly not to be sniffed at. So stock Brut and you should get stinking rich.



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# NEW WYETH Gel filled TEMAZEPAM CAPSULES



## THE SAME BUT DIFFERENT

Gel-filled to reduce the risk of  
intravenous drug abuse

Bio-equivalent to the liquid-  
filled temazepam capsules  
which they replace

In 10mg and 20mg strengths  
gel-filled capsules are  
marked 'W10' and 'W20' to  
distinguish them from liquid-  
filled capsules. Packs are  
clearly labelled 'gel-filled  
capsules'

## DISPENSE WYETH TEMAZEPAM

Now available as abuse resistant tablets or  
gel-filled capsules

### TEMAZEPAM GEL-FILLED CAPSULES

#### Prescribing Information

**Presentation:** Temazepam 10mg and 20mg in gel-filled opaque, yellow soft-gelatin capsules. **Indications:** Short term treatment of insomnia (up to four weeks). **Dosage:** Adults, 10-30mg, half an hour before retiring. In all cases the lowest effective dose should be used and treatment should be intermittent if possible. The dose may be increased to 40 or 60mg, in patients who do not respond to the lower dose because of severe or persistent insomnia. Treatment should be withdrawn gradually. Elderly, Elderly patients or those suffering from cerebral vascular changes such as arteriosclerosis are likely to respond to smaller doses, possibly half the normal adult dose. Children: Not recommended. **Contra-indications:** Sensitivity to benzodiazepines, acute pulmonary insufficiency. Not to be used during pregnancy and lactation unless clinically justifiable. **Precautions:** Concomitant administration with alcohol or CNS depressants may accentuate effects. Prolonged or excessive use may lead to dependence and withdrawal symptoms on cessation of therapy. Patients should be cautioned against driving or operating machinery until it is established that they do not become drowsy or dizzy. Rarely amnesia, paradoxical aggressive reactions, depression and suicidal tendencies have been reported. Psychological adjustment to loss or bereavement may be inhibited. **Side-effects:** Drowsiness or dizziness on waking is rare. Morning headaches, transient rashes and gastro-intestinal disturbances have occasionally been reported. **Legal Category:** POM, CD (SCH 4). **Packs and basic NHS cost:** 10mg x 500 - £12.06, 20mg x 250 - £10.52. **Product License Numbers:** 10mg PLO0110106, 20mg PLO0110107. Further information is available on request. Wyeth Laboratories, Taplow, Maidenhead, Berks SL6 0PH.

**WYETH  
GENERICS**

\*trademark

## COUNTERPOINTS



## Dulcolax goes dramatic with new look pack

Windsor have repackaged the Dulcolax range, describing the new look as dramatic and one that allows the brand name to stand out strongly.

New packs are being phased in over an eight week period, starting with the 60 tablets pack which are available immediately.

A new insert explains what

constipation is, how to use Dulcolax, and gives tips on how to maintain a healthy bowel with diet and exercise.

Advertising support and a consumer educational campaign, featuring Anna Raeburn, continue, say Windsor Pharmaceuticals Ltd. Tel: 0344 484448.

## Mercury free battery

A dry-cell alkaline battery, believed to be the first in Europe without mercury, has been launched by Ralston Energy Systems, the European arm of Eveready. The Ucar brand has been developed to meet a growing demand in Europe among environmentally conscious consumers.

Roger Pryke, a director of the UK company said: "Ralston Energy Systems is already the

leading supplier of batteries in continental Europe. This new product means that we are now poised to take a major share of the UK market."

The batteries will have PET packaging in preference to PVC, as PET does not emit hydrochloric acid when incinerated. Ralston Energy Systems UK Ltd. Tel: 0923 774677.

## Sucron promotion

Nicholas Laboratories are promoting their Sucron brand with a consumer competition to win a luxury Moben kitchen.

The promotion will run until the end of the month and each 750g family pack is flashed with details and an entry form. Nicholas Laboratories Ltd. Tel: 0753 23971.

## Medised support

Medised is being supported this Autumn with bonus offers, samples, display materials and two new items, notepads and carrier bags printed with the "no more pain, no more tears" logo.

The brand is currently advertised in TV Times, Me and Practical Parenting, Panpharma Ltd. Tel: 081-561 8774.

## Fuji party pack

Fuji have introduced a party pack for their Quicksnap Flash single-use camera, and a counter dispenser for their standard Quicksnap. Both have been launched in time for the Christmas market. The Party Pack contains party poppers, hats, blowers and balloons, along with the camera to help make a party go well. The counter dispenser has been designed to hold ten Quicksnaps and will fit compactly onto a counter top of display shelf. It will be available to retailers from September. Fuji Photo Film. Tel: 071-586 5900.

## Vetchem parcels

Animal medicine distributors Vetchem are offering a selection of small parcel offers to pharmacists.

Acclaim Plus flea room spray is offered as buy six (trade £10) get one free. A parcel of the Otodex range for skin and ear problems in dogs and cats is on offer at £16.93 (trade), a 15 per cent discount. The parcel contains 12 ear drops, six skin cream and six shampoo.

A selection of Harkers pigeon products — for canker, worms, tonic and coccidiosis — is available for £87.50 (trade) with four bottles of Duramitex loft disinfectant free. Vetchem. Tel: 0543 262882.

## Unichem for Christmas

Unichem have published a brochure detailing promotional offers on over 70 Christmas gift items; POR of over 41 per cent is available on some brands.

The company is also offering a special price on Sony audio and video tapes for the peak Christmas period. A prepack of Sony's best selling tapes has been put together and is available at £9 instead of the usual £112.18. Unichem. Tel: 081-391 2323.

Sterling Health are introducing new graphics for their laxative brands Mil-par liquid and California syrup of figs. The "lady in blue" illustration, long the focal point of the Mil-par bottle, is now surrounded by a graduated blue halo in contrast to the plain white background of old. The new pack are currently being phased in. Sterling Health. Tel: 0483 65599.



# New Inoven hits pain where it hurts. All over the country.



Following the successful test market, Inoven from Janssen Pharmacy Division is now available nationally, backed by a £6 million\* advertising campaign including nationwide TV and posters.

New Inoven contains only Ibuprofen and is available in tamper evident packs

of 12, 24 and 48 caplets. New Inoven is exclusive to pharmacies so the profits are all yours.

It looks as though it's going to be a painless autumn.

For further information and details of the launch offer contact your Janssen

Pharmacy Division Representative or Janssen Pharmacy Division on 02357 72966, extn. 4418.

\* (calendar equivalent) TM denotes trademark

**INOVEN**<sup>TM</sup>

Ibuprofen 200mg

HITS PAIN WHERE IT HURTS



# SCRIPT SPECIALS

## Hospital-only Recormon

Boehringer Mannheim have launched Recormon, a hospital-only genetically engineered preparation for use in dialysis patients with renal anaemia.

It contains epoetin beta, recombinant human erythropoietin presented as a vial of freeze-dried powder supplied with an ampoule of water for injections.

Recormon comes in 1,000iu (10 £90), 2,000iu (10 £180) and 5,000iu (5 £225) strengths. Each is available with an equal number of ampoules of water for injection, in 1ml, 2ml and 5ml sizes.

The product licence number is 0075/0065. *Boehringer Mannheim UK (Pharmaceuticals) Ltd. Tel: 0506 412512.*

**Upjohn** are launching Hemabate.

It contains carboprost 250mcg, a 15 methyl analogue of prostaglandin F2 alpha. It is used in the management of severe postpartum haemorrhage due to uterine atony. *Upjohn Ltd. Tel: 0293 31133.*

## Naprosyn 375 available

Syntex are launching Naprosyn 375 tablets on September 24. These will allow more flexibility to suit patients' needs in the usual dosage range of 500mg-1g of naproxen once or twice a day, says the company.

For example, a loading dose of 750mg or 1g per day is recommended in the acute phases of severe night time pain and/or morning stiffness, and in patients being switched to Naprosyn from a high dose of another antirheumatic compound.

Naprosyn 375 are oval, pink scored, low excipient tablets, inscribed "Naprosyn 375" on one side and "Syntex" on the other. The product licence for the packs (60 £11.24) is 0286/0104. *Syntex Pharmaceuticals Ltd. Tel: 0628 33191.*

## Epogam Paediatric for 'improved compliance'

Scotia Pharmaceuticals have launched Epogam Paediatric capsules for the symptomatic relief of atopic eczema in children.

These have been designed to improve compliance in children who have difficulties in swallowing larger capsules, say Scotia.

Although the original capsules can also be used in children — they can be snipped open and the oil swallowed directly or mixed with a drink or food — the paediatric capsules are easier to use. The soft capsules have a neck which can be snipped and the contents squeezed out.

Each capsule contains 80mg gamolenic acid (GLA) provided by evening primrose oil, double that found in the original capsules. The dosage in children aged 1-12 years is one to two capsules twice daily.

Epogam paediatric can also be prescribed for adults who have problems swallowing large capsules; the dosage is two to three capsules twice daily.

The company recommends starting with the highest dose.

Another feature of Epogam Paediatric is that it relieves itch without causing drowsiness; it works by replenishing the lower levels of GLA and its metabolites found in the skin and other tissues of atopic eczema patients, say Scotia.

In addition, when used with other treatments it permits a dose reduction in topical steroid and other drug use, says the company.

There are no known contraindications to the use of Epogam but it interferes with epileptogenic drugs, so monitoring of patients is advisable (see Data Sheet).

Scotia say that Epogam's safety record has led the Medicines Control Agency permitting the removal of the black triangle from the Data Sheet.

The product licence number for the POM paediatric capsules (60 £15.80 trade) is 4382/0013. *Scotia Pharmaceuticals Ltd. Tel: 0483 574949.*

## Lipostat: a new HMG-CoA reductase inhibitor

Bristol-Myers Squibb have launched Lipostat, a new cholesterol-lowering drug. It contains pravastatin, an HMG-CoA reductase inhibitor, which the company claims has advantages over other drugs in the group.

The major difference is that pravastatin is hydrophilic rather than lipophilic. This limits its interference with necessary cholesterol synthesis at peripheral sites. It selectively inhibits cholesterol synthesis primarily in the liver, which is the major site of cholesterol production.

The company believes that this is likely to minimise the potential for side-effects, both peripheral and in the central nervous system. Adverse events are usually mild and transient, and

include rash, headache, diarrhoea and fatigue (see Data Sheet).

Pravastatin inhibits the production of low density lipoprotein cholesterol in the liver, and also increases the number of LDL-C receptors on cell surfaces, which results in a clearance of circulating LDL-C.

The results in a reduction in total cholesterol at a daily dose of 40mg Lipostat by up to 25 per cent; LDL-C decreases by as much as 34 per cent, whereas the "good cholesterol" HDL-C, increases by up to 14 per cent, say Bristol-Myers Squibb.

Lipostat can be used in combination with other lipid-lowering agents, such as bile acid sequestrants where an enhanced effect is observed. No noticeable drug interactions have been

### BRIEFS

**Graneodin ointment** 15g is being replaced with a 25g pack (£1.47 trade). All orders of the 15g tube will automatically be substituted with the 25g size, say *E.R. Squibb and Sons Ltd. Tel: 081-572 7422.*

**Macroclantin 50mg capsules** OPDs (Specials July 21) are now available. Orders for Securitainers will automatically be adjusted to an equivalent number of OPDs. *Norwich Eaton Ltd. Tel: 091 222 1882.*

**Codalax and Codalax Forte** are no longer available from Regent Laboratories. Their distribution and marketing is now being handled by *Napp Laboratories Ltd. Tel: 0223 424444.*

**Shire Pharmaceuticals** have taken over Midrid from Carnrick Laboratories. *Shire Pharmaceuticals Ltd. Tel: 0264 333455.*

**Price reduction:** *Boehringer Mannheim* have reduced the price of *Ismo Retard* 28 tablets from £11.34 to £10.50 (both prices trade). *Boehringer Mannheim UK (Pharmaceuticals) Ltd. Tel: 0506 412512.*

reported, and precautions, contra-indications and warnings are similar to other HMG-CoA reductase inhibitors (see Data Sheet).

Pravastatin is indicated for use in patients with primary hypercholesterolaemia that is intolerant or unresponsive to other forms of therapy, with a cholesterol level greater than 7.8mmol/l. The usual dosage is 10-40mg at bedtime.

It is presented in Lipostat as pink, oblong, biconvex tablets engraved on one side with "Squibb" and 154 (10mg) or 178 (20mg). It is a POM, and both strengths come in blister packs of 28 tablets — 10mg £16.18, and 20mg £31.09, both prices trade. *E.R. Squibb & Sons Ltd. Tel: 081-572 7422.*





## For some of your customers this is a Chamber of Horrors

**M**icroscopic House Dust Mites can't be seen with the naked eye, yet they are found in every home in Britain. They live on the skin scales shed by humans and animals, and are found in the greatest numbers in the mattresses and soft furnishings of bedrooms. Despite their size House Dust Mites are a serious problem. It's been clinically proven that they release potent allergens into the air, which are major 'trigger' factors in asthma and allergic conditions such as Perennial Rhinitis and Eczema. For some of your customers, the bedroom can be a dangerous place.

### **New Actomite destroys the threat**

Actomite is an easy-to-use, effective, CFC-free spray. It is proven to destroy House Dust Mites,



their larvae and eggs so thoroughly that their numbers are significantly reduced for up to three months.

### **Actomite is spreading the word**

A £500k initial launch campaign will explain the danger of House Dust Mites and the solution nationwide, through full colour advertisements in the Women's and Parental press and informative FREE leaflets.

# ACTOMITE™

## Actively Controls House Dust Mites

100 Gold Cross and Searle Representatives will be telling the compelling story to Hospital Specialists and GPs too, combined with impactful advertising in the medical press. Stock and recommend Actomite now, help your customers to protect themselves and their families against the threat of the House Dust Mite.

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Exclusively Through Chemists

Actomite is a trademark of G.D. Searle & Co



# Q&A

## ANSWERS

**When is a contraceptive not a contraceptive? The Pharmaceutical Services Negotiating Committee explains**

## QUESTIONS

1. What is the significance of the symbol ♀ which has been written on the prescription?
2. Would the patient be exempt from a prescription charge if there was no female symbol written on the prescription?
3. Can the pharmacist endorse the prescription with the female symbol if the prescriber has failed to write it on the form?

1. The symbol ♀ is the female symbol and indicates to the pharmacist that the preparation on the prescription is for contraceptive use and that a prescription charge should not be levied. (Drug Tariff Part XVI G).
2. No. In the absence of the female symbol, the prescription is not considered to be a contraceptive preparation and it would be subject to a prescription charge.
3. No. The endorsement of the female symbol has to be written by the prescriber. Therefore, if the preparation order is for contraceptive purposes but the symbol has been omitted, the prescription would have to be referred to the prescriber for the necessary endorsement.

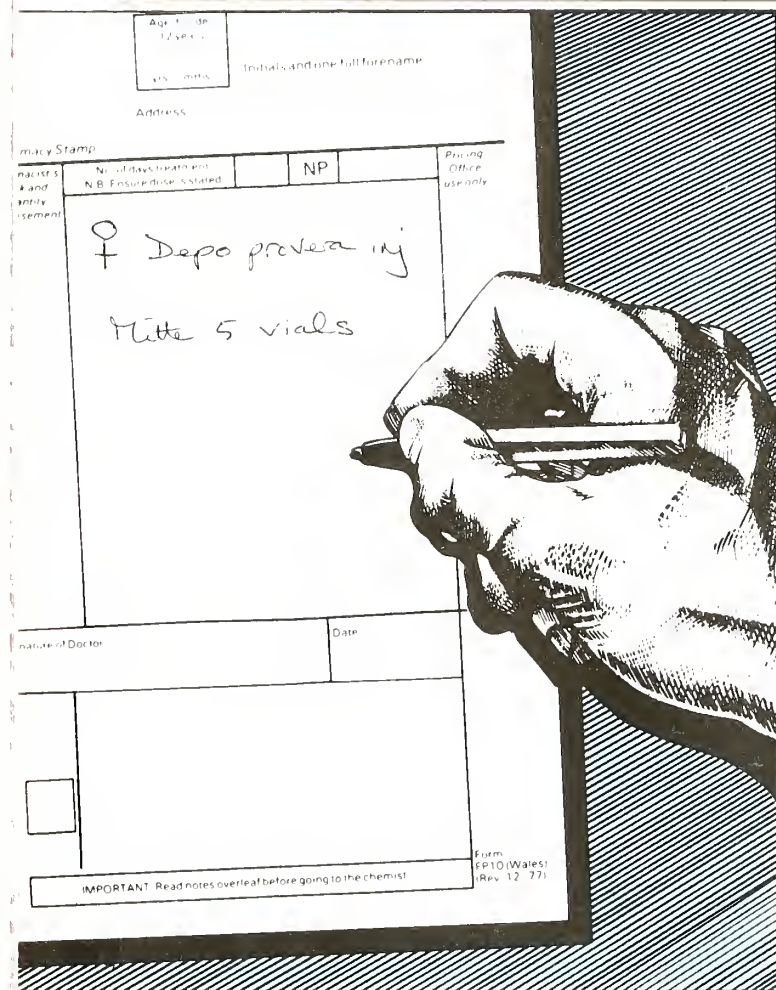
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**Kodak**  
XTRALIFE

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## What a surprise!

*"Ye Gods! Must I endure all this?"*

*"All this, aye, and more. Fret till your proud heart break!"*

Julius Caesar  
Surprise! Surprise! The Review Panel is unable to accept PSNC's reference on remuneration. Hardly amazing, when the Panel admits that it is unable to understand the criteria being applied. It is a sad state of affairs that pharmacy, which has striven to provide the NHS with value for money, is penalised in such an insulting manner.

When an extra £100 million can be found to improve GPs' surgeries when they already have most of their costs paid for them, it signifies the high respect this Government has for our profession that our remuneration does not even keep pace with inflation when we have to bear *all* the costs ourselves. My message to pharmacists is this: "Get your fingers out!" Get writing to your MPs, tell your local Conservative associations of the dangers inherent in the Government's policy towards pharmacy, that standards must decline, and distribution of pharmacies will also suffer.

As for PSNC, get your act together! Stop wallowing in self-righteous indignation and act with a little imagination! No point in crying over spilt milk now: a new approach is needed, new policies and ideas to extend the pharmaceutical service into the '90s. A major campaign is required to inform the public of the benefits that could be theirs, and also of the problems that will undoubtedly arise if the Government persists with its farce of recruitment, retention and motivation.

I would question the motives of the Department of Health. How can we plan a rational distribution of pharmaceutical services, how can we make *any* provision for the future when faced with economic attrition on this scale? Is the DoH sincere when it says that it would like to see improvements in the pharmaceutical service?

Hindsight can be a dangerous thing. It would be most dangerous in this instance if contractors felt they had little reason for confidence in PSNC. They should remember that at the LPC delegates' conference earlier this year, nobody opposed the recommendations made by David Sharpe, and nobody proposed any alternative course of action. This is not to say that PSNC is above criticism, but make your criticism constructive, not divisive. Now as

never before, we must present a united front; now as never before PSNC needs our *active* support.

What is required is an injection of new ideas and enthusiasm for the practice of community pharmacy, and to that end I urge my colleagues to involve themselves as much as they are able by contributing their ideas at both local and national level. At the very least, communicate! Let your local pharmaceutical committee have the benefit of your ideas, tell PSNC how you would like to see the practice of pharmacy developing. Too often the leaders of our profession operate in a vacuum. We should rise to the challenge of 1990, so that in the future we will not be so dependent on one item of service for so much of our income.

John Donoghue  
Liverpool

## Boning up on calcium?

I was disappointed that your Pharmacy Update on osteoporosis (C&D August 4) gave no advice on appropriate preparations for pharmacists to recommend: calcium gluconate, calcium lactate and calcium vitamin D are still frequently recommended although the amount of elemental calcium in

each tablet is low: 600mg of calcium gluconate contains 30mg of elemental calcium, 300mg calcium lactate contains 23mg of calcium and a calcium and vitamin D tablet contains 33mg of elemental calcium. Calcium carbonate 500mg however contains 396mg of elemental calcium. Thus one tablet of Tums contains as much calcium as 17 calcium lactate tablets. If a pharmacist preferred a "non-supermarket" preparation, then Titalac or Woman Kind calcium could be recommended. Sandocal is a high dose calcium supplement but is three times the cost of calcium carbonate as a supplement.

Calcium carbonate is also my antacid of choice because the patient benefits from the calcium as a supplement. This is particularly important in pregnancy, while breast feeding and in post menopausal women. A recent survey showed that breast feeding women still lost calcium even when taking 1.8g of elemental calcium each day. Other antacids such as magnesium and aluminium stop the absorption of calcium.

The article states that the equivalent of a pint of milk should be taken each day. In fact the National Osteoporosis Society recommends a minimum of 1.5g elemental calcium per day in post menopausal women.

Mike Hadley  
Bewdley



Winners of the Togs independent chemist competition were invited to a champagne reception at Swaddlers' head office in Gateshead to receive their prizes. The competition, which was first announced in C&D, ran during April. Winner of the first prize — a Volvo 440 GLE — was Stephen Wise (right) who together with his wife, received the keys to the car from Nick Wall, assistant product manager, Togs (left), and Howard Barnes, senior trade marketing manager. Second prizes of a holiday for two in the Caribbean were won by Mr and Mrs Aucott and Mr and Mrs Caley. Winner of the third prize of a JVC System C compact cassette camcorder was Mr Cooper



# SmithKline Beecham Health Care lead the market as CoughCaps go national

SmithKline Beecham Health Care are no strangers to advancement and innovation, using the very latest in new technological development to help pharmacists meet consumer requirements. In the last few years SmithKline Beecham have initiated a number of developments in a diverse range of markets. They brought pharmacists Setlers Tums — the first and only fruit flavoured indigestion remedy available in the UK with assorted and now orange flavour; Oxy — the highly successful range for teenage spots and acne; Beechams Hot Blackcurrant and Hot Lemon with Honey — effective medication with delicious flavours; Resolve — the all in one remedy for the morning after creating a completely new market sector — yet another first from the No 1 OTC medicines company.

Now the company is setting the scene for a new decade of advancement in the £57m cough market. Following an overwhelmingly successful test market they are taking CoughCaps\* remedy national this Autumn. A unique formulation offering up to eight hours cough relief in capsule form, this dynamic product opens up a completely new chapter in cough control.

SmithKline Beecham have been at the forefront of the cough market for many years with the Veno's range — the "number 2" cough remedy in the market. Over the last few years, however, the market has shown limited growth and little innovation. CoughCaps is geared to change all that and bring the treatment of coughs into its next era.

## A sticky market

The cough market represents the fourth largest OTC medicines sector. The slow growth and lack of innovation in the market in the past decade demonstrates the tremendous opportunity, scope and potential available for a new innovative product. To date the market has been dominated by liquids which, while currently

\*CoughCaps is a trademark of SmithKline Beecham Health Care.



offering a demulcent benefit, are nevertheless not everybody's ideal choice of medication. Some cough sufferers dislike the flavour and sensation of taking a sweet, sticky liquid. Bottles, caps, cups and spoons

soon become sticky and are not easily portable. This led SmithKline Beecham to carry out extensive consumer research on the most practical medicinal presentation. The findings indicated that many cough



Cough market profile





sufferers wanted a product that was clean, modern and hygienic, offering effectiveness and longer lasting relief in a convenient and easy to dispense format. This was especially noted for day-time coughs.

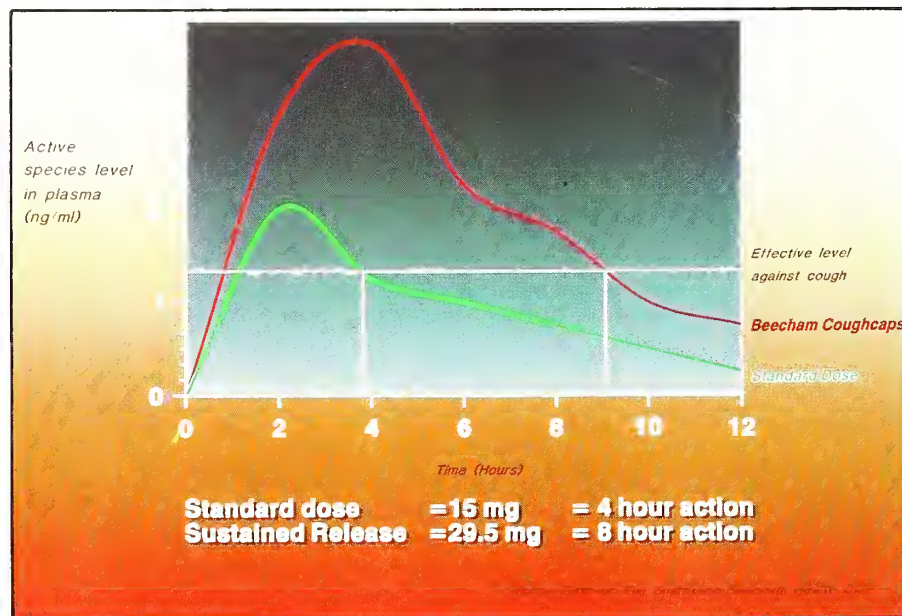
Over 80 per cent of cough product sales go through the pharmacy. Consumers actively seek advice on the right product for their particular coughs. "P" products are perceived as being more potent and the introduction of an eight hour cough relief in capsule format fulfils the modern technology requirement. Another important factor is that the CoughCaps formula does not cause drowsiness. This is a critical feature for daytime products and complements the fact that CoughCaps are blister-packed for easy dispensing and portability.

## Investment in R&D

Research and development on CoughCaps began in 1984 with considerable management time and resource investment. One of the key product objectives, dictated by consumer needs, was to find a formulation which would double the length of action given by current cough products — effectively from four hours to eight hours. The graph below shows how CoughCaps work.



Ken James, head of OTC medicines R&D



### Longer lasting CoughCaps

The drug in a standard cough remedy is absorbed into the blood stream. It eventually reaches a peak after which the elimination phase begins causing the drug to fall below the therapeutic level after four hours. The drug in CoughCaps only falls below the therapeutic level, however, after eight hours. The drug selected for CoughCaps is dextromethorphan. Dextromethorphan was chosen as the cough suppressant due to its proven efficacy.

CoughCaps contain 29.5mg of dextromethorphan (40.2mg of dextromethorphan hydrobromide). The formulation consists of a system that controls the release of the drug into the bloodstream. Extensive studies were carried out comparing the standard dose (15mg dextromethorphan) of a standard cough product with the new CoughCaps formulation. These proved that with the controlled release system the drug did not fall below the therapeutic level until

well after eight hours. This gave SmithKline Beecham the data which confirmed the achievement of the research and development team in developing a unique new product which delivers convenient and long lasting cough relief.

The dose of dextromethorphan in standard OTC cough liquids is only 15mg — and this is the maximum dose allowed by law. To introduce a product with the CoughCaps benefit of eight hour cough relief, the company had to secure a Statutory Instrument\* to amend a Parliamentary Order. Approval for this was finally secured on November 1, 1989. Consequently, the maximum dose of dextromethorphan for use in controlled release OTC preparations was increased for the first time ever in the UK to 30mg.

\*SI 1989, No 1852. *The Medicines (Prescription Only, Pharmacy and General Sale) Amendment Order 1989.*

Ken James, head of OTC medicines research and development for SmithKline Beecham Health Care says: "The story started in 1984 when we began to challenge the widely held belief that cough products had to be in syrup form and could only generally work for four hours. We wanted to develop a capsule which worked for eight hours.

"So now we have successfully negotiated the test market, we are about to go national. It's been a long hard road from 1984 but we've got there and this is next in the long line of innovative products to come from the SmithKline Beecham Research Department, and there's plenty more to come."

## The marketing package

**Product:** A cough capsule that offers up to eight hours of cough relief without drowsiness. In fact, a length of effectiveness never available before — in a convenient, easy to carry around form.

**Brand name:** Communicating the product benefit was essential. The modern capsule format is a well understood principle and SmithKline Beecham's medical heritage is well appreciated by consumers, therefore the brand name rationale as CoughCaps fulfilled the brief.

**Pack:** A striking pack design with impactful branding and strong communication of the key benefits — up to eight hour cough relief without drowsiness — was essential. It also includes a green cross to ensure consumers' perception of CoughCaps from Beecham as a credible, serious medicine. Each carton contains ten capsules, (one capsule per dose) blister packaged for hygiene and safety and selling at £2.29 RSP.

**Promotion:** At test market launch a large range of display material was assembled to maximise communication of the unique benefit of eight hours cough relief. In-store display items included an impactful tower unit outer carton, a bold and informative showcard and a sturdy shelf reserver.

**SmithKline Beecham** also mounted an informative campaign for doctors in the TVS test area. They received information on the product and were encouraged to request a sample and information leaflet for display in surgeries and waiting rooms. All pharmacists in the test area were contacted and given a sample and details on the product and the promotional packages. They, too, were actively encouraged to display consumer leaflets which were topped up regularly by SmithKline Beecham Healthcare representatives.

## The advertising message

The company sought to develop a campaign that met a number of criteria. First and foremost, it had to communicate clearly and single-mindedly the clear point of difference from other cough products — up to eight hour cough relief. It also had to communicate the capsule format and the handy, portability benefits.

The dual day and night usage benefits message was another priority as was the fact the product offered a 'no drowsiness' benefit. Finally, the tone of the advertisement had to be in harmony with the product. It should have high recall, stressing the effective and serious positioning of CoughCaps remedy, but without deterring



consumers who might be wary of a stronger medicine formulation. A breakthrough in OTC medicine advertising resulted. A new animation technique called claymation was used to develop an unusual but appealing alarm clock. The clock, suffering a cough, demonstrates that at night or during the day, CoughCaps relieves coughs for up to eight hours without drowsiness, while current cough liquids available only offer the short-lived relief of four hours.

### Why a test market?

Despite all the confidence behind the product, SmithKline Beecham decided that they must test-market the formulation before going national. There were two key reasons. Firstly, they recognised that the coughs market was traditionally a liquids market and that any variation from this theme did involve some element of risk.

Secondly, because CoughCaps was such an innovation — a completely new concept for the consumer to accept — a test market afforded the opportunity to examine all elements of the product and package and, if necessary, to adjust them to perfection for national launch.

Simon Pulsford, general manager SmithKline Beecham Health Care says: "The concept of treating coughs with capsule medication needed extremely careful researching. Capsules can be perceived as being stronger medicine and the added eight hour time period of effectiveness was a new and unique proposition. All our consumer research indicated that the public was ready to accept and understand the benefits that CoughCaps offered.

"The traditional treatment of coughs with liquids is also perceived as a soothing effect, and again we needed to ascertain consumer reaction to the taking of a capsule to treat their cough. You may say we were





## ADVERTISEMENT FEATURE



*Simon Pulsford, general manager*

over cautious in this modern day, but medicines in particular are an area with strong loyalty to existing products and this dramatic breakthrough for a cough remedy might have met some resistance. The test market has shown that presented with a unique, longer lasting formulation consumers are willing to change."

### Test market results

SmithKline Beecham Health Care used a number of key sources to evaluate the test market.

**Sales force:** Peter Allen, SmithKline Beecham sales representative in the very heart of TVS found that his pharmacists greeted CoughCaps remedy with confidence and enthusiasm. He told us: "Pharmacists instantly recognised the benefits of the product, and that there was a real need for a cough medicine that would give longer lasting relief".

A second TVS sales representative Vic Blazye added to these words of encouragement reporting: "CoughCaps would certainly challenge the cough liquid market; portability, convenience and no messy bottles in the bathroom were quickly appreciated by pharmacist and consumer alike." He had no problem in persuading pharmacists to take in the tower display unit, many of which stayed on show over the whole Winter.

**The pharmacist:** Positive feedback via sales representatives was immediately forthcoming. A number of pharmacists were asked to complete a questionnaire for SmithKline Beecham Health Care evaluation. The results were:-

- ☐ All pharmacists stocked (or were awaiting delivery of) CoughCaps.
- ☐ All of the pharmacists that participated in the survey, either did recommend or were happy to recommend CoughCaps in the appropriate circumstances.
- ☐ Pharmacists told us that 88 per cent of consumers asked for CoughCaps unprompted, as a result of advertising, while the remainder bought on recommendation.
- ☐ 91 per cent of CoughCaps buyers remembered the brand name from advertising.

☐ Display material was very well accepted with 60 per cent of pharmacists displaying the tower counter unit.

The comments of just three pharmacists in TVS are as follows:

... "CoughCaps are a novel idea, they are well worth trying"

... "They are a good idea taken on a twice daily basis. I know it works as I have taken it myself."

... "There's a gap in the market for a sustained release preparation and they are much easier to carry about. There's a need for high dose dextromethorphan preparation."

### Consumer response

SmithKline Beecham carried out considerable consumer research. Questionnaires were inserted into the first cartons of CoughCaps manufactured and distributed into the trade. At 10 per cent response rate, the many questionnaires returned afforded a reliable and invaluable source of information.

- ☐ Users found CoughCaps remedy effective quickly
- ☐ Effective for a long time
- ☐ Handy and portable
- ☐ Easy to swallow
- ☐ CoughCaps were more or equally as soothing as their usual cough liquid
- ☐ 70 per cent of users found them more effective than their usual cough liquid and as a result over three quarters of them said they would stay with CoughCaps to treat their cough from now on.

usual brand, or because they simply prefer not to take OTC medicines to treat their cough.

With the final confirmation that the test market was confirmed an overwhelming success the national launch is announced. The 1990 challenge: CoughCaps remedy will be launched nationally on September 10 using the same roll-out formula as the test market. The company is confident that the CoughCaps opportunity will grow an extra dimension to successful cough market sales.

### £1.6m advertising support

SmithKline Beecham Health Care are investing a massive £1.6m in the national television launch of CoughCaps which will go on air in November. They are extending the range of display material to include a handy counter unit (in addition to the outer display case) featuring the unique CoughCaps advertising clock. Giant cartons of CoughCaps are also available for window displays and in-store units. Pharmacists are being actively encouraged to utilise the quality display support which is available from SmithKline Beecham Health Care sales representatives. The helpline can also dispatch display material to pharmacists who complete the coupon below.

If you do not receive a regular call and would like to, please send the coupon to: Sales promotions manager, SmithKline Beecham Health Care, SB House, Great West Road, Brentford, Middx.



*Display material available*

These positive findings were not alone — SmithKline Beecham found that other independent pieces of research backed up the questionnaire and all in all concluded that most of CoughCaps users wished to stay using this product to treat their cough. Of the people who still had not tried CoughCaps, a high proportion were interested in doing so once they had heard the benefit of its formulation. As SmithKline Beecham expected, there are some cough sufferers — but only a few — who are not interested, either because they prefer their

Please tick as appropriate  
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YES ☐ NO ☐

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# In my view: the supply of spectacles through pharmacies

**Mr G.E. MacCaghrey, BSc FBCO, is chairman of the Association of Optometrists. He warns that pharmacists can expect their profession to come under close scrutiny by government, and argues that they should think twice before succumbing to commercial pressure to supply spectacles.**

The past few years have seen increasing pressures on the professions, particularly optometry, but increasingly pharmacy also. This can be because of government intervention, or commercial pressure. All of us need to look carefully at our existing modes of working, and find other methods of increasing our profitability.

The *sine qua non* of the professional person is that the best interests of the client override the financial interests of the practitioner. It is this fact above all others that differentiates the professional from the tradesman, and allows us to argue that a protected status is in the interests of the public and not solely in the interests of the profession.

Pharmacy, like optometry, is in this position. The present Government has no sympathy with restrictions of this kind unless they can be demonstrated to be for the "public good", and even then only if the harm which may occur with de-restriction is at a level to make freedom a choice undesirable.

My original grounding was in pharmacy before changing course and heading into university to undertake the rigours of obtaining the requirements for registration in optometry. Consequently I feel that I may have more of an interest in the well being of your profession than many. I believe that you will shortly experience much of the close scrutiny of your function that my profession has seen over the past few years.

## Change in legislation

It is a relatively short time since the Government decided that one restrictive practice that could be relaxed was that concerning the supply of spectacles. It is now possible for any person to supply spectacles, subject to some minor regulations such as the need for a valid prescription and supply to adults only. Britain is almost alone in Europe in allowing this unrestricted supply. The sale of ready made reading glasses without prescription was also legitimised in 1989 for the first time since this was outlawed in 1958.

This latter measure has caused considerable disquiet in the ophthalmic world. Although it is accepted that wearing lenses which are not specifically designed for that person's eyesight can cause no permanent damage, the purchase of these items will often mean that the wearer does not attend for regular eye examinations. Between 5 and 10 per cent of all such examinations result in the patient being referred for medical attention, and this percentage increases with age. The sale of "ready mades" will ultimately lead to the later detection of many eye diseases, and is for this reason that most optical practices still refuse to supply them.

The purchaser also has a greater expectation of expertise if these are sold through a pharmacy than, for example, from



a market stall, yet the sales assistant involved has little more knowledge. Ready mades are designed to correct presbyopia alone, and this should not effect anyone below the age of 40. However, there is some evidence that these are being sold to all age groups (including the under 16's which is illegal), and to persons registered as partially sighted.

The unregistered suppliers have made little impact, probably supplying less than 2 per cent of the total number of prescription spectacles supplied in the UK. The public still prefer to obtain their optical appliances from the practice where the eye examination has taken place, and to be supplied by a qualified person. The unqualified have also found that it is less easy to compete on price than they had imagined. Almost every registered practice is able to supply frames and lenses at a price equal to, and in many cases lower than, those of the unregistered, but also offer superior skills and technical excellence.

Your profession will need to use all of its skill to persuade the Government that the restriction of supply of many pharmaceutical products must be retained in the hands of the qualified pharmacist and not deregulated in a similar way. Many lay people with vested commercial interests will argue otherwise. Unless you are vigilant and plan for every eventuality you will lose that battle.

I note that there is now some pressure on pharmacists to supply spectacles. Adverts appear which offer phenomenal profits, for little work and no skill. The use of the "autorefractor" is seen as a foolproof method of determining the needs of the patient. It is well known that any skilled person can make his/her craft appear simple. It saddens me that some of my colleagues in pharmacy are seeking to engage in this pursuit. The pharmacist has a status in society which lends this activity a form of prestige which would not be deserved.

It is worthwhile spending a little time looking at the way in which a prescription is derived, how that is converted into a spectacle correction, and where the autorefractor fits into this procedure.

## The autorefractor

An autorefractor is a modern machine which gives an objective readout of the refractive state of each eye in turn. It can be used after very little training, and does not require any input from the subject. Many optometrists already use these in their practices. I have examined the ease of use and accuracy of almost every machine of this type (and there are about ten different manufacturers) available in Britain. I also have one in my own practice which is used on all of my patients. The results are used as the *starting point* for the rest of the examination, and replace the more traditional objective part of the examination, known as retinoscopy.

The advantages of an autorefractor are:

- Can be used by semi-skilled staff
- Impresses patients
- Quickly gives refractive status
- Can be used in addition to retinoscopy as a second objective method of refraction.

The disadvantages of an autorefractor are:

- The readout is an approximation of the "true" refractive status
- Produces a result for each eye individually and therefore there is no binocular balance. (The eyes are not individuals but part of a system and must work correctly together)
- Only produces a distance correction. (Most spectacle wearers need a near addition)
- Does not work adequately on the young because of overactive focussing
- Unreliable results on many elderly persons due to cloudiness of the lens and vitreous
- Cannot be used if the pupil is less than 3mm in diameter
- Individual parameters being measured may be reasonably accurate in isolation, but inaccurate when taken as a unit
- On occasions produces spectacularly inaccurate (but consistent!) results
- Repeatability is questionable (ie produces different results for the same person at different times).

## The eye examination

In an optometric eye test the retinoscopy or autorefractor would account for about three minutes of a total examination time of 15-30 minutes. The examination can be divided into two main areas.

The refraction: Is a visual correction needed and if so what?

The health check: Is there any evidence of eye or general disease.

However, in reality the two parts are

*Continued on p398*



## PERSONAL OPINION

inseparable and findings in one part have a relevance to the other. Once the basic objective refraction is found, either by autorefractor, or more usually retinoscopy, this is further refined by subjective means until the correct prescription for each eye individually is found. This is revised to balance the two eyes together.

Many patients also have defects in the muscle control of the eyes which can be corrected by modifications to the spectacle lenses (or eye exercises). After the binocular distance correction is determined the optometrist will repeat the same procedure for near, or any other position (eg VDU) which is required.

This is necessarily a brief outline of the full eye examination. However useful an autorefractor is found to be, there is one aspect that is beyond any doubt. It is impossible to advise anyone that they do or do not need glasses on the basis of the printout. Over 99 per cent of people have a measurable refractive error so on this basis alone they would all be found to need a correction. Some errors are insignificant, but without a full history and examination it is impossible to know which.

### Supplying the spectacles

The training for a dispensing optician takes two years. It is also part of the university course for the optometrist. The rudiments of fitting spectacles can be taught to a moderately intelligent person in a relatively short time. Many practices employ such dispensing assistants who work under the supervision of the registered optometrist or

dispensing optician.

Once the visual correction has been decided the prescribing optometrist or doctor has the right to expect that this will be converted into spectacles which are not only adequate, but produced with the optimum visual effect in mind. In some cases this will mean relatively simple lenses into almost any frame which fits correctly. However, in most cases this will involve considerable knowledge of the design characteristics of particular lenses and how these will interact with various frame designs.

Take a few basic variables: there is a large body of patients who request light sensitive (photochromic) lenses. In the UK there are over 20 types, each of which has particular

advantages and disadvantages. In "simple" clear lenses there are numerous combinations of glass, plastic and polycarbonate, made in different refractive indices and constringence. We have available in excess of 200 different types of bifocal. Modern lens technology is producing new materials and designs at an every increasing rate. To supply just basic lens designs in every case would be analogous to treating all pain with aspirin.

I know that like me, members of your profession have the best interests of the public at heart and so I hope therefore that pharmacists will think very carefully about their responsibilities to the interests of the public before lending an aura of respectability to a purely commercial venture.



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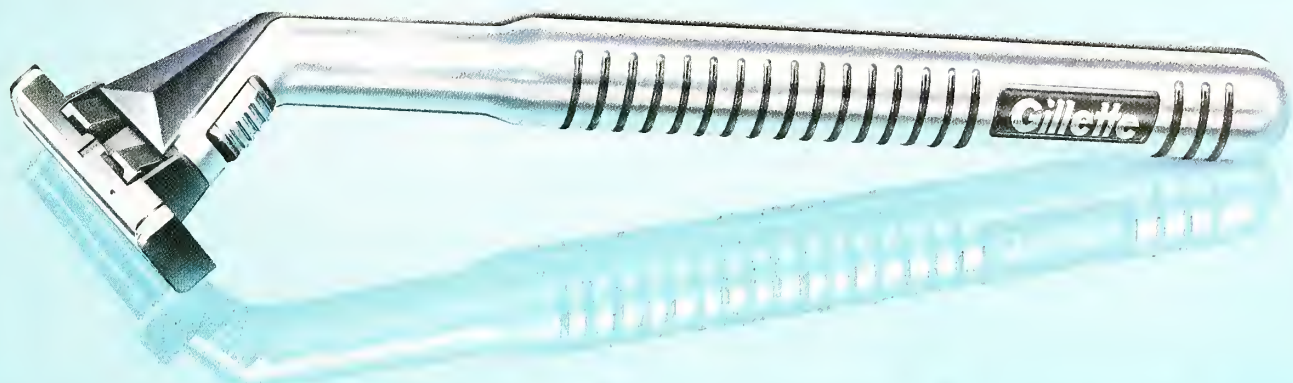
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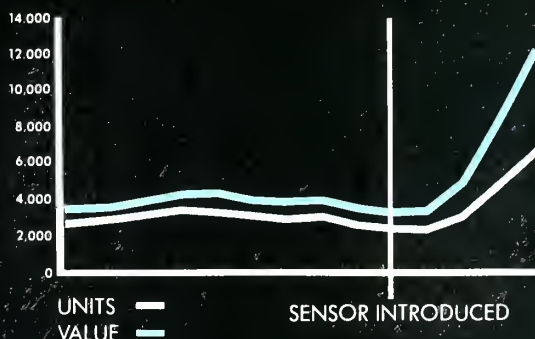
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# The Lady Mayoress

Part-time pharmacist Mrs Jennifer Hillier talks to *C&D* about her recent election as Mayoress of Bromley

One week in June, the diary of pharmacist Jennifer Hillier — who was recently elected mayor of Bromley — read something like this:

*Friday morning* — Attend church service to celebrate Chelsfield primary school's 125th anniversary, followed by Victorian open day at the school.

*Afternoon* — Metropolitan Police youth and community section event for children with special needs. Call in to mayor's parlour to deal with correspondence and legal documents.

*Evening* — Meet foreign visitors, then on to a demonstration by the housing and social services department on current local issues.

*Saturday morning* — Biggin Hill Air Fair and church service to commemorate the 50th anniversary of the Battle of Britain.

*Afternoon* — Annual garden party at the Wellcome Foundation, Beckenham.

*Evening* — Save the Children Fund gala concert at Fairfield Halls, Croydon.

*Sunday* — Mayor's annual civic service at her local parish church.

The remaining four days that week were spent, as usual, working part-time as purchasing pharmacist at Farnborough Hospital. Her evenings were occupied with further mayoral duties, yet she still found time for her "very supportive and understanding" husband, son and daughter.

## 'Action-packed weeks'

That action-packed week was typical. This year Mrs Hillier has 700 engagements representing the 300,000 residents of London's largest borough. Fortunately the Whitley Council specifically allows a few days paid leave for mayoral duties. The remaining engagements will be slotted into almost every evening, weekends, her Fridays "off" and her annual holidays. Highly efficient secretaries at the civic centre and two teams of mayoral attendants and a driver help her to be in the right place at the right time.

"So far I've found it very interesting and refreshing," she says. "Every day brings something new. Bromley is a community I've been part of all my life but I'm seeing more of it now than I've ever seen before."

Mrs Hillier has been interested in politics since her schooldays and as a student at Chelsea College department of pharmacy. Sixteen years ago, when taking a break from community pharmacy to look after her pre-school children, she stood as Conservative councillor in the Farnborough ward by-election. She was elected at this first attempt and took a keen interest in planning and education.

At that time there was much pressure for building in the outer London boroughs. Large areas of rural Kent were rapidly turning into the capital's urban sprawl and there was a strong local feeling that the green belt should be saved. There was also pressure to close small village schools which she was anxious to preserve, and she spent a "very rewarding" period on the education committee, becoming chairman of primary education for eight years and secondary education for four. She has also



been vice-chairman of the technical services committee which deals with a range of issues from highways to property maintenance, and she has been a health authority representative.

These duties as a councillor took four evenings a week, then there was time spent meeting residents concerned about everything from parking congestion to the state of the footpaths. She still had enough energy to return to work part-time at Beckenham Hospital where she stayed for eight years before moving to Farnborough.

In general, Bromley council has a happy relationship with its residents and local associations. Even the community charge has been less vigorously opposed there than in many areas, "maybe because we are a financially prudent council and there have not been the dramatic cost increases seen in some places," she believes.

Although she has had to give up her committee duties this year, she still feels strongly about planning issues and recently fought against plans for a huge shopping centre and leisure complex in an agricultural area.

"I would also like to see local authorities retain their powers," she adds. "We sometimes get an element of interference

from Whitehall that can be resented, particularly in planning, and occasionally the Department of Education and Science can be a bit dictatorial on the local management of schools. But with goodwill on both sides these differences can usually be resolved."

One of the highlights of her year as mayor will be a visit to the West German town of Nieuvied with which Bromley is twinned, to take part in their own "mayor-making" ceremonies. And for any pharmacists feeling generous, this year's mayor's charity is the centenary appeal for the NSPCC's Bromley Branch. One event will be a 20-mile sponsored walk from Chelsfield to Eynsford and back, in September.

Recently she welcomed to Bromley another lady who clocks up several hundred public engagements in a year — the Duchess of York. One major difference, says Mrs Hillier, is that the Royals do it for a lifetime whereas mayors don't. Could she cope with a lifestyle at that pace?

"I'm sure I could work out some kind of a system," she says positively. "One of the pleasures is constantly meeting new people and new situations. I'll probably suffer from withdrawal symptoms when the year is over."





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Liquid Gaviscon contains 6.2mmol sodium per 10ml. Liquid Gaviscon is sugar-free. **Retail Price:** (July 1990) 200ml £2.25, 300ml £2.99. **Product Licence No:** 44/0058. **Reference:**

1. Data on file, Reckitt & Colman Pharmaceuticals (Final Trial Report, November 1984).  
2. Chevrel B. *J Int Med Res*, 1980, **8**: 300. 3. Counterpoint, Taylor Nelson. Further information is available on request. Reckitt & Colman Pharmaceuticals, Hull, HU8 7DS.  
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# PHARMACY update

OTC MEDICINES

**The most common urological condition encountered by pharmacists is cystitis. Jane Sheridan, Boots teacher-practitioner pharmacist at the centre for pharmacy practice, The School of Pharmacy, London, looks at what help pharmacists can offer sufferers of this often painful condition**

Cystitis is a condition often experienced by women. It is, however, uncommon in men. Cystitis is caused by inflammation and/or infection of the urethra and bladder.

In community-based patients the most common infecting organisms are *Enterobacteriaceae* (around 90 per cent). Other common causes of cystitis are fungal and viral infections, toxic chemicals and certain drugs.

## Symptoms

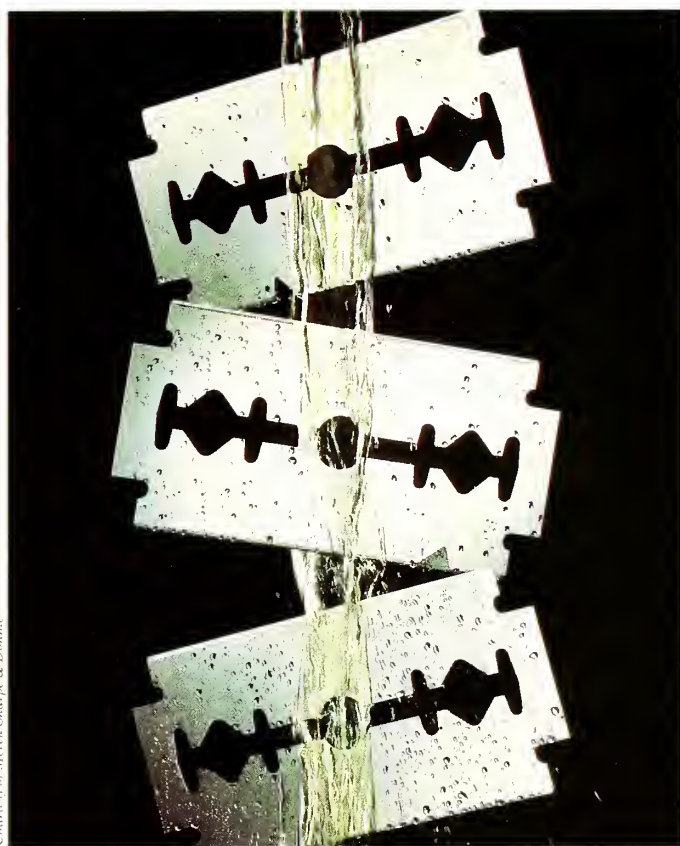
Early symptoms include a stabbing or pricking sensation around the entrance to the urethra. The patient may experience a burning sensation or pain on passing urine as well as an increased desire to pass urine, often in very small amounts.

Later symptoms of back or loin pain and fever may indicate that the infection has spread to the kidney and these patients should be referred. Often, the onset of symptoms is sudden and may be distressing especially if the patient is experiencing this for the first time.

Other symptoms may be associated with those described above:

**Vomiting/fever.** The patient should be referred to the doctor as this indicates a generalised infection. Cystitis may be occurring because of a reduced resistance caused by other infections, eg respiratory.

**Vaginal discharge.** Changes in normal vaginal discharge may indicate fungal or other bacterial infections and the patient should be referred.



Courtesy of Mark Sharpe & Dobson

## Coping with cystitis

**3. Changes in urine.** In cases of severe inflammation of the urethra, blood may appear in the urine (haematuria) and may cause the patient to become alarmed. The urine may also become darker and have an unpleasant odour. In both cases refer the patient.

**4. Frequency of urination.** Patients who do not empty the bladder often during the day run an increased risk of contracting cystitis after exposure to the infecting agent, as the urine is a good breeding ground for bacteria.

**5. "Honeymoon cystitis".** This is the name given to the symptoms of cystitis experienced by women after sexual intercourse. Damage to the vagina and urethra during

intercourse may cause this.

Symptoms of cystitis in children and men should always be referred. In men they may indicate prostrate problems. Pregnant women with cystitis should also be referred because of complications with kidney infections.

## Questioning

Women who have had previous occurrences of cystitis should be questioned further to distinguish between persistent symptoms and those of separate but frequent recurrences. If the symptoms are persistent (ie without a period of respite of a week or more) and she

has been taking antibiotic treatment for this from the doctor, this may indicate either that she is resistant to the antibiotic or that the course of medication was not completed.

All women with persistent or recurring symptoms should be referred. Recurring cystitis with an increased thirst, weight loss and symptoms of *Candida* infections may indicate diabetes.

If the patient has tried any of the various different OTC preparations available for symptomatic relief without success, or if medication prescribed by the doctor has failed to work, refer the patient. Remember that certain drugs (cytotoxics, cyclophosphamide) can cause direct chemical cystitis.

## Treatment

Once it has been established that the woman is not suffering either from serious, recurrent or prolonged symptoms there are a number of OTC products available to relieve the symptoms of cystitis. Most of these contain potassium or sodium citrate in the form of sachets of powder which are made into a drink and taken for a maximum of 48 hours.

If symptoms persist after this time the patient should be advised to seek further medical attention. These products work by increasing the pH of the urine and thus counteracting the acidification caused by the infecting bacteria. Some bacteria require an acidic environment in which to survive. It is the acidic urine which causes most of the discomfort.

Products containing potassium or sodium citrate should not be counter prescribed for patients taking nitrofurantoin (used to treat urinary tract infections) as nitrofurantoin requires acidic urine, to be effective.

Preparations containing potassium should not be given to patients taking potassium-sparing diuretics, aldosterone antagonists, or ACE inhibitors, as hyperkalaemia may occur.

Preparations containing sodium should not be given to the following patients: hypertensives, pregnant women, or patients with heart problems.

Potassium citrate mixture should be taken well diluted with



water. Hyosciamus tincture may be added (see BNF) and may reduce urinary urgency by decreasing smooth muscle spasm in the bladder. Hyosciamus is contra-indicated in glaucoma.

The use of hexamine (Hiprex) is contra-indicated by the BNF due to the incidence of side-effects caused by formaldehyde production, namely painful micturition and bladder irritation as well as gastrointestinal disturbances.

## Advice to patients

Advise sufferers to increase fluid intake at the first sign of symptoms. Drinking 500ml of water for the first three-four hours then 300ml every couple of hours for the next eight hours is a recommended strategy. Fluid intake should be raised during the entire attack.

Advise the patient to urinate frequently and to empty the bladder completely. Making urine less acidic by using one of the potassium or sodium salt preparations will help.

A hot water bottle can be used to ease discomfort and a simple analgesic may be recommended to relieve pain.

For those women who suffer from symptoms of cystitis after sexual intercourse the use of a lubricant during intercourse may reduce trauma to the vagina and urethra. Both partners should wash before and after sexual intercourse to reduce the chance of infection of any bruised or damaged tissues around the vagina.

The use of detergents and perfumed toiletries is often associated with the occurrence of symptoms of cystitis and patients should be advised to avoid these if possible.

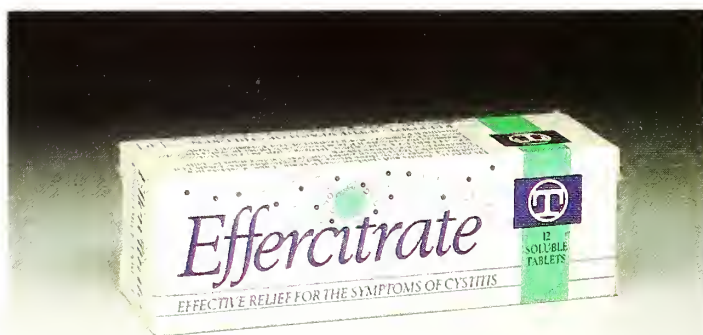
## When to refer

Men  
Children  
Fever/vomiting  
Weight loss and increased thirst  
Pregnancy  
Vaginal discharge  
Haematuria and other changes in appearance of urine  
Persistent symptoms not responding to OTC or POM treatment  
Recurrent symptoms

Always remember that the symptoms of cystitis may be of sudden onset and be severe, causing great discomfort and anxiety to patients. It may be useful to reassure the patient that the condition is both common and easily treatable.



Product	Manufacturer	Price	Status	Description	Dosage
Cymalon	Sterling Health	£2.75	GSLP	Granules containing sodium citrate 4g, in six 7g sachets	One sachet in water three times a day for 48 hours
Cystemmine	Abbot	£2.79	GSLP	Granules containing sodium citrate 4g, in six sachets, (lemon-flavoured)	One sachet in water three times a day for two days
Cystoleve	Cupal	£2.55	—	White powder containing sodium citrate 4g, in six sachets	One sachet in water three times a day for 48 hours
Cystopurin	Fisons	£2.69	P	White, citrus-flavoured granules containing potassium citrate 3g, in six sachets	One sachet in water three times a day for 48 hours
Effercitrate	Typharm	£2.58	P	Effervescent tablets (12) each containing citric acid 1.14g and potassium bicarbonate 1.39g	Two tablets in water up to three times a day after meals
Potassium citrate mixture, BP (recently prepared)		£0.28 per 100ml (net price)		Mixture containing potassium citrate 1.5g/5ml	10ml three times a day, well diluted with water



"Effercitrate was the first real alternative to potassium citrate mixture", says pharmacist Mik Thornton, whose company Typharm introduced the product about seven years ago. It is essentially a reformulation of potassium citrate mixture as effervescent tablets. These dissolve in water to produce a fizzy solution that is "quite pleasant to take" and which satisfies the BN requirements that the mixture be freshly prepared. Two tablets produce the equivalent of 10ml of potassium citrate mixture.



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# Setting up shop: Making the buying decision

In the fourth of his series on starting up a pharmacy Eric Jensen BCom, MRPharmS, MInstM, looks at how to assess the viability of a business

There are two valuable principles to bear in mind when assessing the value of a pharmacy — think more to the future than to the past, and don't take the net profit in the accounts at its face value. What the pharmacy has achieved so far can only be a guide, not a guarantee.

The essence of assessing an existing pharmacy or the site for a possible new one is research of the area. Try to weigh up the drawing power of the shop; how far away can custom be attracted in the light of competition, both from within and outside the profession? A count should be made of the number of households to be catered for and of the maximum amount of prospective trade. The Family Expenditure Survey, (HMSO) gives data on what families in various parts of the country spend on a wide variety of products.

The figures reached by counting households and studying their expenditure must be realistically discounted, for only a part of the total theoretical turnover will be achievable. However, the research will at least reveal maxima and discourage over-optimism.

## Exploiting potential

Armed with the results of the research we can check on how far the business under review has exploited its potential; we should also be alerted to the possibilities of selling products not so far handled.

The next step is to study the accounts for at least the latest three years. Beware of the pharmacy without accounts prepared by qualified accountants and without independent professional stock valuations. Remember that without accurate stock figures for both ends of any accounting period the gross profit figure cannot be accurate. Clearly, without an accurate gross, the net profit shown is not to be relied upon.

Every figure in the profit and loss account should be examined from the standpoint: "how much, if at all, would the figure vary under my ownership?" Your research should indicate whether the turnover might be expanded, for according to the type of expansion the gross margin would almost certainly vary. The expenses, especially rent, rates and wages, will almost inevitably rise.

Sometimes a pharmacy can show a very low net profit or even a net loss, but still be a worthwhile buy. The wages and salaries might be inflated because the owner has, as a deliberate policy, had locums for extended periods and has traded time-off for profit. If your policy is to be different such loss could be converted into profit.

You might discover that an unusually low sum for wages is caused by members of the family working in the business without



receiving the rate for the job. But would this apply to you, if you decide to buy? Again, if the vendor owns the freehold, has a realistic current rental been charged? How would any rent you would be asked to pay affect the net return to you?

By analysing every figure in the accounts you can arrive at an "adjusted" net profit. You can then estimate the reward you could expect if you bought the pharmacy; this is more important to you than what has been made historically.

When you have reached an adjusted net profit you should deduct what a manager of such a pharmacy would currently be paid. The resultant "pure" profit amount is the return you would make on your investment, the recompense for taking the risk of being an entrepreneur.

Your investment is the *total* sum you pay for the concern, "lock stock and barrel;" the fact that part of the money is borrowed does

not alter this. If you buy a freehold, allow for a national market rent in calculating the adjusted net profit.

Once you have gathered this information you will be able to prepare a profit and loss account forecast for one or more years ahead. This will favourably impress a potential source of finance.

The turnover projection should be subdivided into monthly amounts with allowances made for seasonal variations. From these figures you can look at cash flow and can anticipate times when borrowing will be needed; for instance, if there is a large seasonal increase at Christmas, extra funds will be called for in preceding months to pay for stock.

There are several financial statistic ratios which give a revealing insight into the pharmacy's performance when compared with general or national information. And if the present owner is a member of the NP, interfirm comparison scheme you could ask to see the latter data.

Work out such facts as turnover per square foot, by departments, the percentage wages are of turnover, the stockturn, cost of stock, and rent and rates as a percentage of takings. Moreover, all these figures for turnover or whatever should be considered in relation to earlier data. Remember too that trends are highly significant, while averages can deceive.

When you have calculated the various ratios, especially the "pure" profit in relation to price asked and the goodwill asked compared with the profit, you can assess the fairness of the asking price. But remember that the market, supply and demand, is the governing factor. There is no 'formula' for goodwill.

## Some key questions to help you evaluate a pharmacy business

1. Why is the pharmacy for sale? If the price is abnormally high or low, why is this?
2. Have you checked that there is a clause in the contract to protect you against unreasonable competition from the vendor in the future?
3. Will the fixtures and fittings fit-in with your plans? Will you need a refit?
4. The contract should stipulate that you will buy only good, clean, saleable stock, but stock complying with this might still not be entirely of the type to suit your requirements. Will you have to reduce or add to stock? How much capital could be involved?
5. Are the doctors' surgeries in the area likely to remain or be re-located? And, as far as you can ascertain, will the pharmacy staff stay on?
6. Are the premises of a size and layout to enable you to carry out any changes you have in mind for the business? Is there room, for example, for a counselling area? Consider the total space available, not simply that used at present. If building work will be called for, try to forecast the cost.
7. Have you calculated just how much you will be left with after tax? Base this on a conservative estimate of profitability. Better pleasant than unpleasant surprises!



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# BUSINESS NEWS

## UBR appeals time limit

Small businesses are being reminded that they have less than a month to lodge an official appeal against the new business rate. The National Federation of Self Employed and Small Businesses is advising business owners to check their new rateable value and if necessary make an appeal. These should be lodged with the local valuation office by September 30.

Failure to appeal by this deadline will mean that businesses cannot reduce their rates bill until the next revaluation in 1995.

John Harris of the NFSE said: "The vast number of appeals expected will result in a backlog of cases at the valuation offices. Many small businesses which have been overcharged will have to wait many critical months before their money is repaid".

Revaluation took place in April in conjunction with the establishment of the Uniform Business Rate. Premises had not previously been revalued since 1973.

The NFSE says businesses can judge the accuracy of their new rateable value by comparing it with the open market rental value of their premises in April 1988, which was the basis of the assessment.

It warns those intending to appeal that the new value may be raised rather than lowered when reconsidered. Interest will be payable on overpayment of rates if they are subsequently reduced on appeal, but only for amounts over £1,000.

The index of retail sales volume stands at 124.1 for July (1985=100), above the level in June but below the level for May. The increase in the amount outstanding on credit agreements was £0.1 billion in July compared to £0.2 billion in June.

Telcon Tubes have produced tamper-evident film for tubes following cases of animal rights extremists spiking tubes of hair gel earlier this year. The company believes its Tubeguard packaging is the first of its kind in Europe.

## £130m price tag put on floated Unichem

Unichem can look forward to a market capitalisation of £130m following the planned flotation and rights issue later in the year, according to market analysts UBS Phillips & Drew.

In a thirty page analysis of UK pharmaceutical wholesaling examining Unichem's immediate competitors and the company's recent history, UBS argue that the future for Unichem lies in three areas: the continued expansion of Unichem's core UK wholesaling operation; expansion overseas into European markets via joint ventures or acquisitions; and diversification into new areas such as retail franchising, home healthcare, and hospital supply.

Unichem's operations director Kelvin Hide described the document as: "A tremendous report; it offers a balanced view and sets out firmly where Unichem is now. It shows, too, that we have a good track record

and are ready to expand". He said the hospital market offered a lot of opportunity for Unichem, together with expanding its retail customer base.

Unichem are currently the largest supplier of prescription drugs into retail pharmacies in the UK. However, the company does not currently sell to hospitals or dispensing doctors and when this is taken into account AAH have the largest market share — 25 per cent to Unichem's 24 per cent.

UBS Phillips & Drew say growth in this market is guaranteed regardless of the economic climate or currency movements, but point out that there is a downside to Unichem's current status as a plc; delayed profit-related payments will no longer ensure loyalty from pharmacists.

Unichem still plan to float the company on the Stock Exchange in November.

## Robinson restructure by selling tissue plant

Robinson Healthcare have sold their tissue making plant at Goytside Works, Chesterfield, to A.M. Paper Mill for an undisclosed sum. "Since we sold our nappy business we haven't had the volumes to operate the machine economically," said Robinson's managing director Andrew Lauder. "However, I am particularly pleased with the agreement as we have a supply contract; we still need some production from the plant."

Robinsons have retained their conversion business, known as the Dry Tissue Unit, and will continue to produce a range of products, including meat pads and printed pieces used in food packing and confectionery. The

Tissue Conversion Unit will move to a more modern production unit next door to the Goytside Works.

Initially the sale will help to reduce the group's gearing, "but we do have plans on the acquisition front." He said the mill at Goytside should benefit from the additional work A.M. Paper Mill will be able to bring to the plant.

Buoyancy in the pharmacy sector may be lessening, according to an analysis by the National Westminster Bank's business information section. Growth in recent years has been stimulated largely by demand for non-prescription items which are now sold by a wide range of retailers.

## Lloyds fined £1,000 for wrong pricing

Lloyds Chemists were fined £1,000 recently after staff at a pharmacy in Cheltenham let discount labels on the shelves at the end of a promotion. The company admitted five counts of wrongly advertised prices.

According to a report in the *Gloucestershire Echo*, trading standards officers who visited the shop after a customer complained about being charged £7.49 for a bag of nappies marked £6.99 noticed four instances of discrepancies between prices on hand-written barkers and on goods.

Appearing for the company before Cheltenham magistrates Roger Craddock said the she cards had been missed by hurried staff. It was the first time Lloyds had faced such charges.

## Lloyds try to sell again

Five Lloyds Chemists premises put up for auction in June by Conrad Ritblat & Co have been resubmitted for sale at an auction on September 12 at the Mayfair Hotel, London. Only one shop, the June batch of six was so privately just prior to the auction.

Conrad Ritblat have been handling the sale and leaseback of Lloyds premises at auctions for about a year and a spokesman said considerable interest was being expressed in the properties.

Thirteen Lloyds shops are expected to feature in the auction this month. They are all freehold in locations such as London, Devon, Surrey, Liverpool, Hampshire and Shropshire.

Unipack are to build a new £3 factory and office complex Wickford, Essex. The 46,000sq development will replace the factory at Billericay.



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# Boots lead in barcode scanning

Boots are the leading retailer in the use of barcoding and scanners according to the latest figures from the Article Number Association. The ANA's newsletter records that 462 Boots premises use scanning on 8,914 scanning terminals. The company is ahead of Sainsburys, Tesco and Dixons.

It reports a total of 5,037 stores are scanning standard International Article Numbering Association (EAN) symbols at the point of sale, an increase of almost 2,000 since last summer.

The level of branded items

coded at source in the UK has increased by more than a half in the past 18 months. An ANA survey found that 63 per cent of traded units were coded at source.

However problems which caused non-scanning had persisted and the level of symbols which did not scan had risen from 6.5 per cent to 7 per cent. Shrink-wrapped packs with tray sides were a particular problem. The bunching of the shrink wrap over the bar code contributed to a failure rate of 11.3 per cent. Most types of packaging were found to

have reached about 60-75 per cent of source coding.

The ANA has reached phase two of a five year plan to achieve a 99 per cent level of source marking; it claims a 63 per cent level so far.

It says retailers working to the guidelines involved would have expected to find all fibreboard cases coded at this stage in the run up to 100 per cent coding by 1992.

High levels of coding were essential, the ANA says, to ensure retailers were encouraged to invest in technology to make efficient use of them.

## Bayer trend downward

Half year results for the Bayer Group confirmed the downward trend evident in the company's first quarter results. Sales for the half year at DM21.8 billion were 3.7 per cent down on the corresponding period last year, though volume was up 2 per cent. The company argues that exchange rate movements diminished the value of sale by more than DM1 billion.

Sales of European companies fell only 1.5 per cent to DM14.9 billion and accounted for 70 per

cent of the group's sales. North American subsidiaries reported sales up 5 per cent in local currencies but after translation into DM the figure was almost 6 per cent lower than last year.

Pre-tax profits for the company dipped 9.5 per cent to DM2.010 billion, and Bayer says that a combination of slightly lower raw materials costs and systemic cost management did not offset downward pressure on selling prices and adverse currency movements.

## Nippon Glaxo

Glaxo are scaling up launch plans for their migraine treatment sumatriptan (Imigran) and have reached an agreement with Eisai, a leading Japanese pharmaceutical company, to jointly market the treatment in Japan. Eisai and Nippon Glaxo will co-operate on clinical trials and dosage forms for the Japanese market.

The company predict registration in Japan is some three years off, but in early June an application was made in the UK for a licence for injectable and oral forms of the product, and in the US for a licence for the product as an injection.

## Effervescent Squibb

Bristol-Myers Squibb have bought a minority shareholding in the French analgesics producers, the UPSA Group, for an undisclosed amount of cash. The company will also have the opportunity to acquire the remaining shares of UPSA in the longer term. UPSA is believed to be the largest privately held drug company in Europe.

The move forms part of a dual strategy to make UPSA's distribution channels available for

the US group's OTC products, while investing in the development of UPSA's products into a worldwide business. Bristol-Myers Squibb's 33.5 per cent of UPSA entitles them to name three of the seven member board.

The French group specialises in effervescent pain relievers and vitamins, but also has non-effervescent products.

The deal is subject to approval by the French authorities.

## EHP go Scholl

European Home Products have announced plans to change their name to Scholl. Chief executive Neil Franchino said that the name change to Scholl reflected the company's plan to focus on personal care.

Scholl contributed the lion's share of the £11.47m profit achieved by European Home Products in the last half year.

### COMING EVENTS

## Stockport course for assistants

The Stockport and District branch of the National Pharmaceutical Association are organising the NPA Merrell Dow medicine counter assistants course which will begin on September 25 for six consecutive Tuesday evenings.

The meetings will be held at the Deanwater Hotel, Wilmslow Road, Woodford, Stockport. 7.30 for 8pm. The fee, payable in advance, is £103.50 per assistant.

Details from Robert Hallworth on 0625 873955.

### Monday, September 10

**Southampton Branch, RPSGB.** Barbeque to be held at Royal Victoria Country Park from 7.30pm onward.

### Wednesday, September 12

**Bath Branch, RPSGB.** Lecture Theatre 5W 2.3, School of Pharmacy and Pharmacology, University of Bath. 7.30 for 8pm. "What the Red Cross does locally", by Stuart Syke, director of the Avon County Branch of the British Red Cross Society.

**Society of Cosmetic Scientists.** "Major issues in sun protection for the 1990s" by Dr J. Ferguson (Boots Co) October 4 at the Royal Society of Art 6-8 John Adam St, London WC2A 6. at 7pm. Refreshments from 6.30pm. Details on 0582 26661.

**British Association of Pharmaceutical Physicians.** "Economic evaluation of medicines - an update", symposium at the Royal Society of Medicine on October 10 at 12.30pm. Registration fee £55 (members), £70 (non-members). Information from Elizabeth Borg on 071-491 8610.

**Royal Pharmaceutical Society Agricultural and Veterinary Pharmacist Group.** Annual weekend meeting, October 13-14, Pratts Hotel, Bath, on "Zoonoses and food borne zoonoses". £80. (Sund only, £25). Applications by October to Mr R.E. Marshall, Room 40, RPSGB.

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# Wholesalers feel the pinch in generally gloomy outlook

he Gulf crisis has thrown all economic forecasts into doubt, and even the latest business statistics are of no help since they redate the troubles. But with the economic gurus of the Paris-based ECD calling on the Government for a continued policy of strong interest rates even before the crisis struck, it is clear that prospects have now worsened for a return to non-inflationary growth and high employment.

In any event the economy already has plenty of problems. The headline rate of inflation is on an upward path, increases in average earnings are already in double figures. Sales look flat at home and abroad, and economic activity is weakening as the labour market turns sour and company failures rise.

The Summer sales-led revival of retail sales in July masks an underlying stagnation. And the

CBI/FT survey of the distributive trades reveals that pharmacies have now joined the ranks of household durable retailers in reporting a sales downturn compared to a year ago. The survey also reveals that wholesalers are now feeling the pinch, as their sales fell in July for the first time since the poll started seven years ago.

The latest detailed sales figures covering retail chemists show a 7.25 per cent decline in sales value between May and June, to a level unchanged on that of a year before. But add the effects of higher prices, and in volume terms sales probably slipped some 9 per cent.

Official estimates for pharmaceutical production during the first quarter suggest that the total value of UK manufacturers' sales fell 2.7 per cent, to £1,388 million; compared with the first quarter of 1989, however, there

was an 11.8 per cent increase.

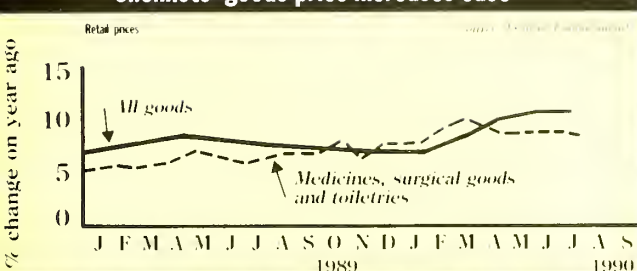
The value of pharmaceutical exports increased by nearly 27 per cent between the first quarters of 1989 and 1990 to £603m, while imports were up by almost 22 per cent. These provisional estimates suggest that home consumption of pharmaceuticals slipped in value by 3 per cent between the fourth quarter of 1989 and the first of 1990, but increased in value by 7.5 per cent between the first quarters of 1989 and 1990.

Stocks held by the country's manufacturers, wholesalers and retailers in the second quarter fell by a seasonally adjusted £236m at 1985 prices. Manufacturers increased their stocks by £7m following a reduction of £97m in the previous quarter; wholesalers cut their stock levels by £168m, following an increase of £41m in the first quarter; and retail levels fell by £75m after a fall of £7m in the previous quarter.

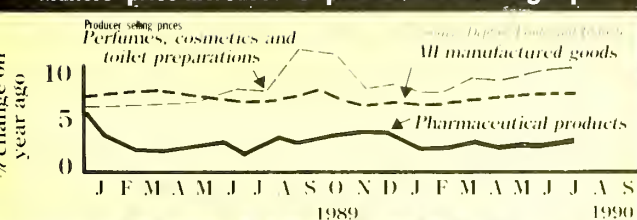
The index of manufacturers' fuel and raw materials costs continued its year-long fall with a further decline of 0.4 per cent. At the same time the overall index of factory gate prices increased by 0.3 per cent, to an annualised rate of 6.1 per cent — down from 6.3 per cent in June.

On earnings, the latest figures show that in June the average weekly rate broke through the psychologically important 10 per cent barrier — increasing the danger of a wage-price spiral.

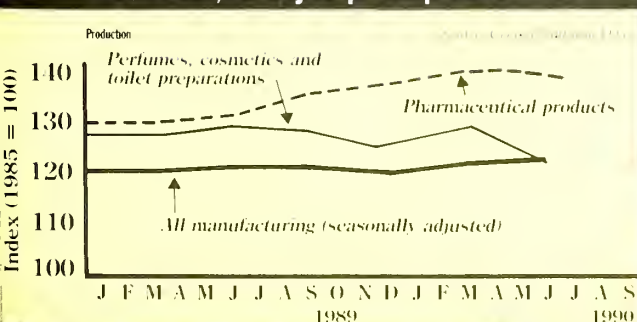
## Chemists' goods price increases ease



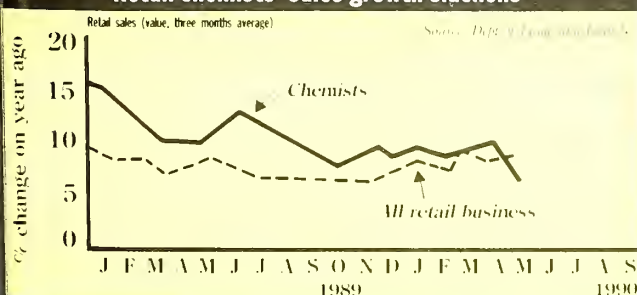
## Makers' price increases for pharmaceuticals edge up



## Perfume, toiletry output drops back



## Retail chemists' sales growth slackens



	Period	Latest	Previous	% change on year
Prices and costs				
Retail prices (Jan 1987 = 100):				
all items	July	126.8	126.7	9.8
chemists goods	July	125.6	124.9	8.5
Producer prices (1985 = 100):				
manufacturing industry, excl food	July	127.6	127.1	6.2
chemical industry	July	121.5	121.0	4.5
pharmaceutical products	July	121.0	120.3	2.5
toilet preparations for men	July	151.1	150.6	11.8
other toilet preparations	July	130.0	128.7	9.2
surgical bandages etc	July	143.8	140.3	8.5
photographic materials	July	131.1	131.1	8.7
Average earnings (Jan 1988 = 100):				
distribution and repairs	May	116.8	117.1	8.6

## Pharmaceuticals output and overseas trade (£m)

UK Manufacturers' sales (£m):	Qtr 1	1388	1427	12
Total Home sales (£m)	Qtr 1	1105	1138	7
UK manufacturers' exports (£m):	Qtr 1	603	602	27
UK imports (£m):	Qtr 1	320	313	22

## Sales

Consumer spending (£bn, current prices)	Qtr 1	83.9	81.4	9.3
<b>Retail sales (value 1985 = 100):</b>				
all retail businesses	June	141	145	8
chemists	June	155	168	0

## Business indicators

Average earnings index (1988 = 100)	May	118.5	117.3	10.2
<b>Stock changes (£m, 1985 prices)</b>				
wholesalers	Qtr 1	-24	-72	-
retailers	Qtr 1	74	-20	-
Unemployment (UK, per cent)	June	5.5	5.5	-9.8

Sources: Central Statistical Office, Department of Employment, Department of Trade and Industry.

\* All figures seasonally adjusted except where marked.



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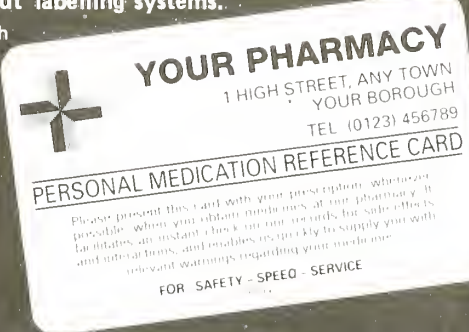
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# ABOUT PEOPLE

## A day out with a difference...

They got up with the rising sun, and from places as far apart as Feltham and Dunfermline made their way to Alton Towers, in the Derbyshire Peak District. By midday 42 coaches had disgorged 1,500 staff and their families from Moss Chemists' 85 branches outside the gates.

The staff day out at the world's seventh largest theme park was part of Moss' 75th anniversary celebrations. Staff watched the final of the Moss Chemists' assistant of the year competition before moving off to lose their lunch down the Black Hole or their sense of balance on the Corkscrew.

The event was sponsored by Crookes Healthcare, and was claimed to be the single biggest promotion between a manufacturer and a multiple.

## Reunion after 25 years

A lunchtime celebration in Cardiff saw 25 pharmacists assembled to celebrate the 25th anniversary of their graduation from the Welsh School of Pharmacy.

Graduates of the class of '65 came from as far afield as Canada and the USA; their pharmacy qualification had produced a wide spectrum of professional careers.

"The reunion was a resounding success," said Barbara Stewart, who works as a pharmaceutical consultant in education and professional development and pharmacy practice research.

■ By coincidence, the last time the BP Conference, which starts next week, was held in Cardiff was... 25 years ago.



*Rafel Rakowski, manager of Moss' Rochampton branch, congratulates Eileen Chandler on winning the Moss chemist assistant of the year title at Alton Towers last Sunday. Apart from the trophy, flowers and champagne, Eileen will be travelling on the Orient Express for a three day break in France*

## How are you?

When pharmacist D.G. Edwards innocently asked one of his customers "Will! How are you today?", he got slightly more than he bargained for!

He was handed the following poem:

"I'm fine thank you, there's nothing the matter with me,  
I'm as healthy as I can be;  
I have arthritis in both me knees,  
And when I talk, I talk with a wheeze,  
My pulse is weak and my blood is thin,  
But I'm awfully well for the shape I'm in!  
Arch supports I have for my feet,  
Or I wouldn't be able to be on the street,  
Sleep is denied me night after night,  
My memory is failing, my head's in a spin,  
But I'm awfully well for the shape I'm in!  
The morale of this as my tale unfold,  
That for you and me who are growing old,  
It's better to say 'I'm fine' with a grin.  
Old age is golden I've heard it said,  
But sometimes I wonder as I get into bed.  
With my ears in a drawer, my teeth in a cup,  
My eyes on the table until I wake up  
'Ere sleep overtakes me I say to myself.  
Is there anything else I could lay on the shelf?  
I get up each morning and dust my wits,  
And pick up the paper and read the 'Obits';  
If my name is still missing I know I'm not dead,  
So I have a good breakfast and go back to bed."

## Racing driver

Pharmacist Jeff Gresswell, Formula Ford 2000 racing driver is being sponsored for the 199 season by Mavala UK.

The company sponsored Jeff last year and reports that he had a tremendous season, becoming the overall winner within his category.

So far this year he has had four wins and four out of four fastest laps.

## APPOINTMENTS

**Cyanamid (UK)** have appointed Jeff Ashpitz as managing director, he is presently deputy MD.

Mr Ashpitz hails from Canada. He joined Cyanamid in 1983 and held a number of international assignments before heading the company's Philippines operation from 1987. He moved to the UK at the beginning of 1989.

The MD since 1988 David Lilley extends his 13 year career with the company by becoming vice-president, Lederle division. He has moved to Cyanamid's world-wide headquarters in Wayne, New Jersey.

**Volumatic Ltd.**, retail security specialists, have appointed Francis Croney as national accounts manager, Scotland.

**Wella GB** have appointed Peter Batten as deputy managing director. He will concentrate on corporate development and European image handling.

**The Office of Health Economics** announces that following the resignation of Ray Robinson, who was appointed director in April, Professor George Teeling Smith will be responsible for the OHE activities for the foreseeable future.

Professor Teeling Smith retired as director of the OHE in April, and was retained as consultant.

**Doncaster Pharmaceuticals Group Ltd.** have appointed Mike Jowett as sales director of Doncaster Perfumes Ltd. Mr Jowett joins the company from Pricecheck Toiletries Ltd.



# What the experts turn to for effective head lice treatment



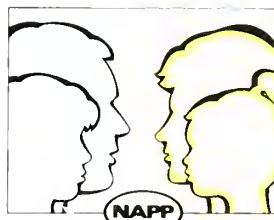
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